

Unlocking Your Body's Detox Potential: The Crucial Role of Lymphatics – Interview with Dr. Perry Nickelston

By Dr. Joseph Mercola

Dr. Joseph Mercola:

Welcome, everyone. Dr. Mercola, helping you take control of your health. And today, we're joined by Dr. Perry Nickelston, who is an expert in lymphatics and it's movement and circulation and exercise and a whole variety of other topics that you're going to be fascinated with. So welcome and thank you for joining us today.

Dr. Perry Nickelston:

Thank you so much for having me here, doc. I love talking about the lymphatics, this is going to be a good time.

Dr. Joseph Mercola:

Well, why do you love talking about the lymphatics?

Dr. Perry Nickelston:

Well, I'd have to share my story of how honestly working with the lymphatics ended up saving my life and I truly believe that. Many years ago was very sick and I was having a lot of infections and different type of autoimmune conditions that I never really got an official name for. Honestly, it felt like I had everyone that you could possibly list off. It was just inflammation run amok. And I was really struggling to get well from the traditional approaches that you would take in medicine. And even from my own thinking process at the time, even though I had been in healthcare for many, many years, but I never really focused on the lymphatic system. And because nothing that I was trying up until that point was helping me get better or feel better, or if it did, it wouldn't last long, so I knew at that moment I'm missing something. I have to think differently.

And then that's what led me down the lymphatic pathway. And then when I found it and then I started to actually apply the techniques, within several days, I made the largest shift in how I felt and my symptoms that I've had probably five years up to that point. And I'm like, "Okay, this is it. This is what I've been looking for." And now I'm just devoting the rest of my life to teaching others that.

Dr. Joseph Mercola:

Well, perhaps you can help us understand precisely what you're calling lymphatics and then why that system would be disrupted and what some of the common causes are.

Dr. Perry Nickelston:

Sure, yeah. So, the way I talk about the lymphatic system is to give it an analogy. Compare it to a fish tank. So, it's the best way for you to visualize it. So, the lymphatic system, it's primary part of two systems. Your immune system, it's the biggest component of your immune system. And it just so turns out that the largest part of your immune system is in your gut that they're finding and that's also where you find the largest presence of lymphatics. So that's not coincidence. And it's a major part, which many people forget, of your vascular system, which is your blood flow system. So, if you have an issue with either one of those, blood flow and lymphatics, they're going to go together. So as part of the immune system, its job is to clean out the body, clean out what I call the cellular poop, the waste poop of the cells in your body, and anything that gets into the body like bacteria, viruses, parasites, toxins, things that are already there, like cancer cells, anything that's inside of you that needs to get out, that's the biggest player.

And if you envision a fish tank, it's got fluid inside of it, that's water, and then you have fish and those are your living cells. And in order to keep that tank clean and functioning well, you need a filter system. And the filter system is the lymphatic system. If that system goes on the fish tank, then the fish tank starts to become dirty, murky, it grows bacteria and fungus, oxygen goes down and the fish will eventually die because of the toxins in the water and the lack of oxygen. And the same thing ends up happening inside the human body. When the lymphatic system tanks go and filters go up underneath, the cells in your body respond just like the fish environment. So the way that you would save the fish tank is by changing the filter system, cleaning the filter system underneath. And that's what I needed to do when I began the lymphatic program.

Dr. Joseph Mercola:

Well, most clinicians that I'm aware of consider the kidneys to be the filtration system of the body, not the lymphatics. So how would you reconcile that?

Dr. Perry Nickelston:

Yeah, so stuff's going to go to the kidneys, but the kidneys take out what the lymphatics send to it. So, it's the transport route.

Dr. Joseph Mercola:

Okay.

Dr. Perry Nickelston:

Okay, so in order to go out of the body, you have to excrete it. So, you usually pee it out through the kidneys, but you also have to remember that the kidneys have lymphatics too. So, if you get backup in the lymphatics-

Dr. Joseph Mercola:

But they also have quite an enormous blood flow, really sophisticated to glomerulus. And it was my understanding that's the way most of it is filtered through the blood, not through, I suspect I wasn't aware that the lymphatics were played that role, especially in the gastrointestinal system.

Dr. Perry Nickelston:

Yeah.

Dr. Joseph Mercola:

So how does it work of the GI system?

Dr. Perry Nickelston:

All these fluids interconnect with each other. So, when you have stuff that comes out through the arterial system, the vascular system, that's the supply side. So that's going to deliver the nutrients in the oxygen and the things to the cells, but in order to get to the cells, they have to cross through what's called the interstitial fluid. And the lymphatic's job is to keep that fluid clean. So once the cells use the nutrients, they're going to create energy and they create waste, metabolic waste. If anything, that comes through the capillary. And that waste has to get out. So, the veins are going to take some of it, but the particles that are too large won't go into the vein. So, then it has to go into the garbage can of the lymphatic system. Then the lymphatic system takes it to the lymph nodes, which are these mini toilets throughout the body, and you have about 600 or 700 of them. And each node kills more things along the pathway.

So, your immune system bags and tags things that the lymphatics capture and that tells your immune system what something is and what it needs to do about it. And then eventually it's going to dump its way back into the veins, and then it's called plasma. So, it goes from the veins and then it's going to go from the veins back into the blood flow again, and that's how it's going to make its way to the kidneys. So, all of these areas intermix with each other. And if you have a backflow in one area, an obstruction or a stagnation, you're going to have backflow in all the other areas because the pressure has to dissipate somewhere.

Dr. Joseph Mercola:

Okay. That makes sense. So, the lymphatics facilitate the excretion of these toxins to the kidneys to ultimately remove him from the blood.

Dr. Perry Nickelston:

Correct.

Dr. Joseph Mercola:

Lymphatics are not functioning properly, that's going to build a backup pressure and cause you problems, which you experienced.

Dr. Perry Nickelston:

Yeah. So all of those things stay inside you.

Dr. Joseph Mercola:

And almost killed you.

Dr. Perry Nickelston:

Yeah.

Dr. Joseph Mercola:

So what are the typical causes of that from happening? How would someone suspect this is going on?

Dr. Perry Nickelston:

Well, I always kind of jokingly say that what's going to cause an issue with the lymphatic system is life, L-I-F-E. Just the sheer overwhelm of being on this planet, having to deal with stress of all type, physical stress, emotional stress, nutritional stress, toxic stress of everything coming into the body that's happening. So, it just gets overloaded because people don't directly take care of the lymphatic system on purpose. So, what do I mean by that? So, the lymphatic system moves primarily through two different ways. Through movement, so whenever you move your body, you pump the muscles and then that moves the lymphatics and that helps it bring it back towards the veins at the collarbone. So, if you don't move a lot, then you're going to be prone to stagnation. And a lot of people don't do a lot of movement. The other one is breathing.

Dr. Joseph Mercola:

I would disagree with that. I would say most people don't do a lot of movement.

Dr. Perry Nickelston:

Yeah. Most people don't move.

Dr. Joseph Mercola:

Sitting is a new smoking.

Dr. Perry Nickelston:

Correct. Yeah, yeah, yeah. So, most people are not moving.

Dr. Joseph Mercola:

Right.

Dr. Perry Nickelston:

They're sitting all the time and then they're stagnant.

Dr. Joseph Mercola:

Yes. Yes.

Dr. Perry Nickelston:

And then when you sit, you actually increase tension in the body, but particularly in your abdomen where most of the lymph is located. So, you get tension and tightness in that abdominal region. So, they don't move a lot. And then the other one is breathing, particularly diaphragmatic breathing. So, when you breathe through your diaphragm muscle, that's above the organs here,

that increases pressure and decreases pressure throughout the body, but particularly in your abdomen. So, it acts like a pump for the lymphatics and the vein flow. And it just so happens that the largest lymph node in your body lives smack dab center in the middle of your abdomen called your cisterna chyli. And that's going to bring the lymph flow back up to your left side collarbone from anything on the lower part of the body and your organs. And most people don't breathe enough or optimally or efficiently through their diaphragm.

So breathing is not great, movement is not great, and then those things stagnate over the years. And I have people that do those things. So, they start moving and they start breathing and they may feel a little bit better, but they still have lymphatic blocks. And the reason is the blocks are too big to now be moved by those two things. Movement and breathing itself are not enough. And the way I kind of describe that is this. If you have a toilet in your house that's backed up, that's like a lymph node that's backed up, every time you flush your toilet, it's going to get closer to the top. Sometimes if you keep flushing the toilet, it's enough pressure to actually pull it through so it can go out into the sewage. But sometimes that's not enough, you have to get in there and you have to use a plunger or you have to snake it. And in my world, the plunger and the snake are your hands.

Dr. Joseph Mercola:

Okay.

Dr. Perry Nickelston:

They do it for you.

Dr. Joseph Mercola:

So, I'm writing a new book on cellular health and one of the most, and really seeking to keep it simple to identify the primary things that result in almost basically every disease, and lymphatics certainly play a role, but one of the key therapies that I'm recommending is movement. Unquestionably movement. And I've come to the conclusion, I suspect you have too, but I'd be curious as to your thoughts, that the best movement possible, the best exercise possible, although there may be another one here which I'm curious as to your thoughts on, generally for every health, generally is walking. And if you're doing another exercise, now you might be doing it for a competition or something, but if you're doing any other exercise and not walking, I would encourage people to seriously reconsider cutting back on that exercise and giving yourself some more time and walk and do that exercise on top of the walking because that that is the primary exercise that every human was designed to do.

Now with respect to lymphatics, and I'm wondering if you agree with that, but I have another question on top of that, with respect to lymphatics, my experience suggests that one of the ways to facilitate lymphatic circulation is through rebounding. You're on a little or mini trampoline, you're up and down, because you're really going to put that, you're going to activate those G-forces to accelerate lymphatics. So, I wonder if you can comment on the walking and the use of a rebounder to improve lymphatic circulation.

Dr. Perry Nickelston:

I love it. They're my top two without question.

Dr. Joseph Mercola:

Okay.

Dr. Perry Nickelston:

And if you can mix those two together, I think you might be onto something here, doc, honestly. Well, humans, were made to move. We're made to walk. We're designed to walk.

Dr. Joseph Mercola:

Yes.

Dr. Perry Nickelston:

So, you're using your muscles and you're pumping fluids all over the place. And you're really using your calves and your calves act like this distal pump that pumps the vein flow also back up towards your heart, but also the lymphatics as well. And you're swinging your arms, which is moving lymphatics. And you should be walking, hopefully brisk enough and without a phone in your hand, so you get some twisting and rotation and torsion in the center of the abdomen, and that moves fluids too. I always tell people envision wringing out a towel, twisting gets fluids to move.

So how about you walk and then you stop for a little bit, then you kind of jump up and down on the balls of your feet because you have built-in rebounders called calves, and you can go up and down like that as well as monitoring your breathing at the same time. Usually I tell people to keep their mouth closed, breath in and out through their nose, and they'll have more optimal movement of their diaphragm at the same time, and you do your lymphatics. So, what I usually teach people is to do those, but then you'll even have a better result when you do some lymphatic work before you walk and before you rebound.

Dr. Joseph Mercola:

Great, I have a minor tweak to that because I've been fortunate enough to have been able to navigate my life to live close to the beach, of the ocean actually. So that I go there every day and I walk on the sand without shoes and minimal clothing, unless it's in the middle of winter. And I live in Florida, so that's not too many days that I'm unable to do that. But what I really enjoy is walking backwards and dancing to good music and just moving my body in as many different directions and flowing as possible. And I'll tell you and I do that for at least 15 or 20 minutes, going backwards.

So, I just love it because you get the twisting above, you get the rotation and you're moving your arms and your hands in every direction and seeking to move every part of your body that you can. Flowing to the music and enjoying it and having joy, experiencing joy of doing it. So, it's a

wonderful comp and doing it in solar noon, so you're getting photons to. And where I do it on the ocean, you're getting negative ions. So that's the ultimate, I think.

Dr. Perry Nickelston:

That's fantastic. Yeah, you can't beat that. You're getting the grounding in-

Dr. Joseph Mercola:

It would be hard. It would be hard.

Dr. Perry Nickelston:

... the electrons in, plus the singing and the dancing and walking and moving in different direction, which is great novelty for your brain.

Dr. Joseph Mercola:

Yeah, yeah.

Dr. Perry Nickelston:

And it's going to decrease your overall stress response and take you out of what I call sympathetic dominant hypervigilance, hyperarousal, fight or flight, hang on for dear life of the modern world. And that's big because we find that people who are under chronic stress and the sympathetic nervous system is in overdrive, increases tension in the body. And when you increase tension in the body, you decrease fluid flow. So, you'll automatically lead to more stagnation of the body fluids, from your blood flow in your blood flow out and your lymphatics and your interstitial fluid flow.

Dr. Joseph Mercola:

So, would someone recognize that this is an issue for them? And maybe you can describe your personal story as to how your life got to the point where you had suffered such misery from lymphatic stagnation and then what caused you to realize that and maybe help us understand your journey and what happened to you to understand what this was and how you learned to address it. And just walk us through that, I think would be helpful for many.

Dr. Perry Nickelston:

Yeah, I think so too. Usually, I'll tell you, most people only find the lymphatics as they checked everything else off first. It's kind of a last thing that they look at. And most of it's because of just how people have been told about lymphatics. Most people don't even consider looking at lymphatics until they have a condition called lymphedema where there's damage to the valve system and a body part, usually the legs or the arms, get abnormally swollen with inflammation and edema because things can no longer drain because they're damaged. Otherwise, people were not really looking at lymphatics at all. Maybe you would get it across your pathway when you got the cancer diagnosis because then they talk about the lymphatic system there that can get some damage to it when you do some chemotherapy or surgical interventions. That's many times what'll happen when people, women especially, get some breast explants or implants, they usually end up with some lymphedema in that region.

So, the lymphatic system's primary job is to help eliminate swelling and inflammation, control inflammation in the body. And we find that chronic disease, chronic pain are tied to chronic inflammation. So, there's got to be, you got to look at an underlying reason of, okay, well, why in the world can't my body control inflammation? One of the reasons it might not be able to control inflammation is because your lymphatic system has an issue and you're stuck full of all that waste material that can't get out, which causes inflammation to keep cycling back. So, one of the things that I tell people is the longer you've struggled to get better, you've tried a lot of different things to move your healing needle and it's not working, that's a pretty big indication that there's something with the lymphatic system that you need to look at.

For me, it was a lot of infections. I would get sinus infections, urinary tract infections, I had three separate episodes of cellulitis, a very painful condition in the body, and I had severe brain fog. And almost every single system in my body was trying to secrete something to heal and protect me. And then now that I look back and say, okay, well that makes a lot of sense now that I know that those are all type of protective responses from the body when you cannot get rid of the waste, so I was more prone to the infections because the lymphatic system couldn't remove the underlying inflammation. And when I started to do lymphatic work, I no longer got any cases at all of cellulitis at all. The post-nasal drip, the sinus infections, the UTIs and bladder infections, gone. Bye-bye.

Dr. Joseph Mercola:

You were struggling those too?

Dr. Perry Nickelston:

From working in the lymphatic system.

Dr. Joseph Mercola:

You were struggling with these?

Dr. Perry Nickelston:

If you name it, I had it. I had virtually everything you could possibly think of.

Dr. Joseph Mercola:

UTIs are relatively uncommon in males. It can happen certainly as you experienced, but it's mostly a female issue.

Dr. Perry Nickelston:

I got them a lot. So, I'm thinking to myself, "Why in the world am I getting all these things, these underlying infections?" And that's because, well, like I said before, my fish tank was a hot mess. So, your fish are going to keep getting sick if you keep putting new fish in a tank that doesn't have great fluid in it.

And that's what happens when your body is trying to make and heal and recover and make new cells. It's going to really struggle to make new cells when you have not so great of a fish tank that they're living in. But of course, they're going to start to have the same thing happen to them that happened to the other ones because you didn't clean your tank. So, you get caught in this vicious cycle that goes through. So, you had to look at the underlying reason of why in the world is my body doing what it's doing? So, if it can't get out through the lymphatic system, your body has to find other ways to deal with it.

Dr. Joseph Mercola:

Yeah. So, I'm particularly curious because it seems like this condition would be more frequent in people who are older. So, the older you get, the more likely you are to encounter this because of just the general degradation of human biology over the time. So, one of the conditions that occurs also that degrades over time is the function of the heart, the ability of it to pump effectively and move the fluid in the body. So, one of the conditions of diminished heart function, sort of heart failure so to speak, would be this also, this peripheral swelling in the legs, peripheral edema. So how would you differentiate that between the lymphatics and a problem with the heart as a pump?

Dr. Perry Nickelston:

I really don't differentiate the two. If you got one, you got the other, they always go together.

Dr. Joseph Mercola:

Okay. Tell us how they're connected.

Dr. Perry Nickelston:

Yeah, so first of all, your heart has a healthy dose of lymphatics too.

Dr. Joseph Mercola:

Okay.

Dr. Perry Nickelston:

So yeah, Dr. Gerald Lemole, L-E-M-O-L-E, a heart surgeon, actually wrote several books on the power of lymphatics in cardiovascular disease, something you need to pay attention to. But again, so you can have an issue with the lymphatics around the heart itself. So, when the lymphatics are stagnated, you get backflow around the heart too. But that pressure that we mentioned before from the lymphatics also can revert back into the veins. So, the veins themselves can become stagnant and slow flowing and then that's going to make a difference on the arterial side. But then you actually end up with your vascular system being harder to move. So, the fluids become more viscous, they get thicker, and then the heart has to beat more and increase pressure to move the fluids through the pipes.

But when blood becomes more viscous, it's very difficult for single red blood cells to go through the capillary because only one can get through at a time. So, then you actually now have an issue where you have poor oxygen supply to the underlying tissues in the body. And then when that

happens, pain's going to show up somewhere when you don't have enough oxygen in the body. So, then it's almost like which came first, the chicken or the egg? Did the heart have an issue or did the lymph have an issue and the lymph have an issue in the heart issue? For me, the answer is yes. It's always both.

Dr. Joseph Mercola:

That is really interesting because it's such a pervasive problem, people with mild heart failure, and one of the conditions is of course, peripheral edema.

Dr. Perry Nickelston:

Right.

Dr. Joseph Mercola:

So, I'm wondering a number of things. And you strongly suggest that they're closely related and if you improve one, you improve the other. So, what would be the typical approach? And this has great impact. I'm surprised to hear this because I wasn't aware of this, but it seems like it would have great impact on the many, many millions of people who suffer with chronic heart failure.

Dr. Perry Nickelston:

Yeah, it absolutely does.

Dr. Joseph Mercola:

That addressing these lymphatics could be a very powerful experience. So, two things. I'm wondering how you would address a program for someone with that and then what your personal experience is in implementing this program, what you've seen as a clinician.

Dr. Perry Nickelston:

Yeah, great question. So yeah, to me, when you have an issue with one of these systems like the lymphatic system, you're automatically going to have some carryover with an issue in your vein system for sure. That's a given, and then that can backflow into the arterial system. So that's why I like Gerald Lemole's books because he goes into it quite in depth because he actually started doing lymphatic work on his patients before he decided to jump in and do surgeries on these patients. He looks at the lymphatic system much more in depth and closely. So, for me, I always take and assess the system and work on the lymphatic system assessment no matter what you have.

So, we check the areas where you have the primary gathering and clusters of your lymph nodes in the body and these lymph nodes are these small little mini toilets and they gather in clusters. Now, like I said before, most of your lymph is located in your gut. Okay? So gut issues and lymphatic usually go hand in hand and they're finding a lot through the current research of many comorbidities going with lymphatic stagnation and obstruction. And the other place that most of your lymph nodes are located are in the neck. About one-third of the total number of lymph nodes are from the collarbone up, which is quite fascinating to me. And then what I thought about that logically, that makes sense because what sits up there? Your brain.

Dr. Joseph Mercola:

Well, and your mouth.

Dr. Perry Nickelston:

So they're fighting the toxins. Yeah, mouth.

Dr. Joseph Mercola:

Your mouth and your respiratory apparatus.

Dr. Perry Nickelston:

Yeah.

Dr. Joseph Mercola:

So as a clinician, as a primary care physician, seeing many, many people with sore throats and seeking to identify whether that sore throat was viral or bacterial, the first thing you would analyze is their lymph nodes to see if they're and tender. Yeah.

Dr. Perry Nickelston:

You go up underneath the jawline and the neck. And then to me, I look at the whole system. So, I tell people you can't isolate a lymphatic problem, it's all or nothing. It's a whole system that communicates with each other. And they're finding from the current research that the waste from the brain drains to the deep cervical lymph nodes in the neck. So if you're blocked in through here, you're going to have an issue up top, in the brain.

Dr. Joseph Mercola:

Isn't the brain drainage through a separate system, the glymphatics?

Dr. Perry Nickelston:

Yeah, you have glymphatics and you have the venous system, the paravenous system, but ultimately you'll see that they're going to drain to the deep cervical lymph nodes.

Dr. Joseph Mercola:

Okay, so they pass through the system and go there. Okay.

Dr. Perry Nickelston:

Yep. Yeah. Yeah. So, what you do is that you assess certain areas of the body for issues with lymphatics. One of the biggest signs of a lymphatic system issue are a lot of puffiness, swelling and inflammation above the collarbone on either side. That's a telltale sign of some blockages in the lymphatic system because that's the main drain for the lymphatic system. 75 to 80% of the lymph and the whole body goes to the left side collarbone, the remaining 25% goes to the right side of the collarbone, but they always work together. So that's the first place that you need to clear when you work on anything is the main toilet drain.

Dr. Joseph Mercola:

So, when you do your work on the lymphatic system, can you describe what that work consists of? I would assume it's some type of massage or are there other things that you do to facilitate recovery of the lymphatic system?

Dr. Perry Nickelston:

Yeah. Doing it by hand is the primary way that I do it, but also use a lot of vibration type therapy, some small vibration ball devices to begin to move those because the most important thing is to get movement in the areas and to do it in the right order. That's paramount to success.

Dr. Joseph Mercola:

Okay.

Dr. Perry Nickelston:

So, the lymphatic system is going to drain based on pressure. So, everything in your body vein-wise and lymphatic-wise are going to go towards the collarbone. That's the ultimate destination point.

Dr. Joseph Mercola:

Whether it's above the collarbone or below?

Dr. Perry Nickelston:

Doesn't matter. It's going to the collarbone.

Dr. Joseph Mercola:

It goes from the head down and from the belly up?

Dr. Perry Nickelston:

Yeah. It goes head down, hands up, feet up, belly up, this way towards the drain. So, the lowest pressure is the collarbone, the highest pressure is the furthest distance away. So, everything wants to go that route. And because of that fact, that's how you actually have to release the lymph clusters from low pressure out to high pressure. So, you clear it from the collarbone out. Right.

Dr. Joseph Mercola:

So, you start at the collarbone lymph nodes and you go distal to those either direction.

Dr. Perry Nickelston:

Yeah, yeah. So, these clusters of lymph nodes, the body is incredible, they gather around the primary joints of your body that are supposed to move the most, and the reason that they're there is because you're supposed to move your joints.

Dr. Joseph Mercola:

Imagine that.

Dr. Perry Nickelston:

Like when you walk, so you're pumping these joints. So, these lymph node clusters gather at the shoulder joint, at the hip joint, at the knee joint in the center of the abdomen and the top of the neck at the first three vertebrae in the neck, occiput, C1, C2, that's the large lymph node in the neck, is right behind the angle of the jaw. That's where you're supposed to get a lot of movement as well. So, if you lack movement in those joints and you don't breathe as well as you should be from your diaphragm here, your pumps are stagnating. And that's why I have people work those six primary areas, we call them the big six because it's a big deal to work them, and then you move. Then you go.

Dr. Joseph Mercola:

Oh, so then you're suggesting this sort of pre-movement workout?

Dr. Perry Nickelston:

Yes, exactly. So, you're going to prime up those lymph nodes.

Dr. Joseph Mercola:

Pre-exercise, exercise is a pre-movement?

Dr. Perry Nickelston:

Correct.

Dr. Joseph Mercola:

Yeah.

Dr. Perry Nickelston:

Yeah.

Dr. Joseph Mercola:

Okay.

Dr. Perry Nickelston:

So, you prime your lymph flow there, but those are also big clusters for vein flow, artery flow and nerve flow together around those areas. And when you work those, you free up all of those. Not to mention that you add proprioceptive sensory awareness to the primary joints of your body before you move.

Dr. Joseph Mercola:

Okay. So, can you give us a little routine that you recommend to your clients or patients as to what they would do for is it five minutes, 10 minutes before they go into a movement approach?

Dr. Perry Nickelston:

Yeah, you go right in before you move and you can even do it after you exercise and after you move, so you can facilitate waist removal after you've exercised.

Dr. Joseph Mercola:

Okay.

Dr. Perry Nickelston:

So, you do the big six in order. So, I usually have people do some rubbing. It can be different pressures, it can be light, it can be a little bit deeper, it can be slow, it can be fast, just don't cause pain when you do it. If you cause pain when you do it-

Dr. Joseph Mercola:

Too much.

Dr. Perry Nickelston:

... that too means you're pressing too hard and you're likely going to tighten up, which is going to defeat the purpose of you doing the reset. So, the first place that you massage and move in all different directions, I like circles a lot, spirals and rotations, are the collarbone, above and below the collarbone on both sides. You start there first and you spend the most time there. As much as you want. I usually tell people 20 seconds is a good target. When you open that up, you're automatically then going to move up into the largest lymph node in the neck, which is spot number two behind the angle of the jaw, and you do the same thing there. Because now you're going to facilitate everything from that to drain down towards what you already cleared at number one. Does that make sense?

Dr. Joseph Mercola:

Yes.

Dr. Perry Nickelston:

So as soon as one opens up, two naturally flows more because you opened up one. Then you're going to go to spot number three and that's the actual shoulder joint, pectoral muscle, armpit, axillary region, like that. Like the width of your hand underneath there, that's spot number three. Spot number three is going to drain towards spot number one. So collarbone, upper neck, shoulder joint. And then number four is the entire abdomen from below the sternum all the way to your navel, the whole thing. Massage that.

Dr. Joseph Mercola:

In the midline?

Dr. Perry Nickelston:

Yeah, all over, the whole place. Midline is great, but I want you to get in there. The whole thing.

Dr. Joseph Mercola:

So, the entire abdominal surface?

Dr. Perry Nickelston:

The whole thing.

Dr. Joseph Mercola:

Okay.

Dr. Perry Nickelston:

Because they're-, especially the midline because that's where everything is going to drain.

Dr. Joseph Mercola:

So yeah, are they mostly in the midline or are they embedded in the intestinal lumens?

Dr. Perry Nickelston:

It's everywhere.

Dr. Joseph Mercola:

Yeah. Not the lumen, but the intestinal-

Dr. Perry Nickelston:

Yeah. Well, the largest lymph node in the body, the cisterna chyli sits pretty much center mass in the abdomen.

Dr. Joseph Mercola:

Of the diaphragm.

Dr. Perry Nickelston:

Yeah, it's going to be between the navel and the bottom of the sternum.

Dr. Joseph Mercola:

Okay.

Dr. Perry Nickelston:

That's usually the spot that it's going to be at the halfway point.

Dr. Joseph Mercola:

So put a lot of pressure there.

Dr. Perry Nickelston:

But your liver, yeah, your liver contributes 50% of your lymphatics to the cisterna chyli, 50%.

Dr. Joseph Mercola:

That's a lot.

Dr. Perry Nickelston:

Yeah. So, what I'm telling people is if you're stuck blocked with poor flow in the cisterna chyli, where's that flow got to go if it can't go up? It's going to go back out.

Dr. Joseph Mercola:

To the liver.

Dr. Perry Nickelston:

It's going to go to your liver and your liver is not going to be happy and then you're going to have liver issues. And then you're going to have vein issues in your liver too because you have venous issues and lymph issues, so it backflows into the gut and the intestines. Okay. It's one of the primary things that can lead to leaky gut, when fluids can't move. So, you spend a good amount of time at number four because I tell people that's a hot mess on most people. And then you go to spot number five, which are the inguinal lymph nodes, that's the crease of the groin because the crease of the groin is going to go towards spot four. You follow?

So that's why you have to clear four first. If you don't clear four first and you went to five first, you're going to send it to a block. That's why you have to start from the collarbone and go down. Then the last one is spot number six. That's the posterior knee, the popliteal region behind the knee, and that's going to take the flow that's coming up from the foot and the calf. Because everything in your foot and your calf is trying to go to the left side collarbone. That's where it's trying to go, veins and lymph, it's trying to go there. So in order to get to that region, it's got to get past the abdominal region and it's got to get past the pipe along the spine that dumps into that left side collarbone. That's a long way to go.

Dr. Joseph Mercola:

Yeah. So, this whole lymphatic exercise you're suggesting, what's the total time it takes? About five minutes, 10 minutes?

Dr. Perry Nickelston:

Oh, yeah, if that.

Dr. Joseph Mercola:

Okay.

Dr. Perry Nickelston:

If you want to do it quick, it'll literally take you a minute. You just rub and I like to do tapping a lot and you can do each point, then bing, bang, boom, go.

Dr. Joseph Mercola:

Okay.

Dr. Perry Nickelston:

But you can spend longer on there if you like. You just have to make sure you do them in the order, one, two, three, four, five, six.

Dr. Joseph Mercola:

Sure, that makes perfect sense.

Dr. Perry Nickelston:

It's not six, five, four, three, two, one.

Dr. Joseph Mercola:

Can you integrate or discuss the benefits or the disadvantages of integrating rebounding in with this? Because just from your description, it seems that it's going to be universally beneficial, but you're not doing it in the right sequence. But if you do it simultaneously with the whole body, does that make a difference?

Dr. Perry Nickelston:

Yes. Yeah. So I love rebounding because first of all, you're moving your body, most people don't move it and you're moving your organs like crazy.

Dr. Joseph Mercola:

For sure.

Dr. Perry Nickelston:

You're like a big what I call slosh water pipe of fluid that that needs to move up and down.

Dr. Joseph Mercola:

And you would be a slosh if you didn't have any collagen, you'd be a blob.

Dr. Perry Nickelston:

Yeah, exactly. Right.

Dr. Joseph Mercola:

Yeah.

Dr. Perry Nickelston:

So, the thing is that rebounding is great, but what you'll find when you start to do this is if you do that big six first, if you open up these big node points first, then you rebound. Then you're going to notice-

Dr. Joseph Mercola:

Oh, so you find that combination is much better?

Dr. Perry Nickelston:

If you do the combination is fantastic.

Dr. Joseph Mercola:

Okay.

Dr. Perry Nickelston:

And then that'll be the person who will say, "Doc, I've done rebounding a lot, but when I added that," I noticed even bigger changes that occurred for people.

Dr. Joseph Mercola:

And is that the strategy you used to recover from your own illness?

Dr. Perry Nickelston:

Yes, that's exactly what I needed to do. So, once I worked diligently with the lymphatics within the first 30 days, the month, I was probably 50% better at least from things that I've been suffering with for five years and I lost 20 pounds of swelling, inflammation, edema and body fat just from doing lymphatics.

Dr. Joseph Mercola:

That's all?

Dr. Perry Nickelston:

Because I opened up the flow route.

Dr. Joseph Mercola:

That's all?

Dr. Perry Nickelston:

Yeah, that's it. Yeah.

Dr. Joseph Mercola:

That's good. That's fantastic.

Dr. Perry Nickelston:

I'll be honest with you, doc, it was something that was so profound, but I never really looked at it. I'm in this field of healthcare, but it wasn't on my radar because I was always looking at musculoskeletal system, I was looking at nervous system at the time, but I never really focused on the lymphatic system. Okay? Here's the thing, you're always working your lymphatic system, most people are just doing it by accident, you don't even know you're doing it. So, every time you move, lymph is supposed to move. And the operative word is supposed to. Every time you

breathe, lymph is supposed to move. When you go for a massage, you are moving the lymphatics. And this is when people say to me, "Well, if I'm doing my massages and I'm doing my breathing and I'm doing my movement, all should be good, right?" Well, we would hope so, but like I said before, two reasons why not.

Sometimes that those blocks are so deep that you got to remove them by hand, but then the reason when you're trying to remove stuff by hand is that you're not doing them in order. People are just rubbing parts trying to move fluids, and they will, but you have to do them in a specific order, so the physics of the fluid flow known as hydrodynamics can efficiently move to where they're trying to move to on their own. They're just not able to do that because of the obstructions that are there, but also the backflow that's happening. Because the lymphatics can get stagnant, but they can also backflow, they can go the opposite direction. And they're finding that sympathetic dominance, hypervigilance, will do just that. They'll usually cause a backflow on the lymphatics. And where you get the biggest blocks that I've found in my experience are the deep lymphatics, and they're the ones that live along in your abdomen and along your spine going up through the big, that's the sewage pipe at the street basically. You know when you flush the toilets in your house? They got to go to the big pipe.

Dr. Joseph Mercola:

You hadn't previously mentioned spinal lymphatics, you're just focusing on the abdomen, the inguinal area and then the popliteal.

Dr. Perry Nickelston:

Yeah. So spinal lymphatics are a little bit more difficult to get. They'll start to move when you begin to restore the big six and get the pressure blocks opened up. Usually, I found one of the telltale signs that you've got a deep lymphatic block behind along your spine, particularly your thoracic spine, because you have to remember your spinal cord and your nerves have lymph too and they have to drain to the same place. And if your lymphs not draining, you can stay backed up with inflammation around the spine and the spinal cord and nerves are not going to be happy. One of the telltale signs of that is puffiness, swelling and inflammation at the sternum bone, your breastplate. That's a big one.

Dr. Joseph Mercola:

Okay.

Dr. Perry Nickelston:

Because it's supposed to be a hard bone. If I find it puppy tender or swollen, that's a telltale sign of backed up, in my world, lymphatics and venous flow at the thoracics. And that's why you want to have good diaphragmatic breathing because that's going to help pull, it sucks that venous flow up and while you want to do your walking and have good rib cage mobility, thoracic spine mobility, so you can get the movement and motion. So, whenever you are breathing in and out, you can create a bigger pressure difference between your thorax and your lungs and your abdomen and then that sucks the fluid up and out. So that's one of the biggest reasons why I like to make sure that you have good mobility in your rib cage and your thoracic spine. Twisting and turning when you're walking and hanging works really great too. If you can hang from

something for a period of time that really begins to open up those ribs along the spine and along the back that get stuck and locked.

Dr. Joseph Mercola:

How long do you hang for?

Dr. Perry Nickelston:

As long as you can?

Dr. Joseph Mercola:

How long do you-

Dr. Perry Nickelston:

As soon as you start, it angles.

Dr. Joseph Mercola:

Yeah, but how long do you hang for?

Dr. Perry Nickelston:

So, here's the thing though. Well, here's the thing, it depends on where you're hanging from.

Dr. Joseph Mercola:

Okay.

Dr. Perry Nickelston:

First of all, it's very difficult for most humans to grab something overhead and hang onto it because they don't have good mobility in the shoulder joint and their thoracic spine is a mess and they don't have grip strength, so it's really hard for them to hold onto something. You'd be lucky if you have a human that can hold onto a bar for 20 seconds before they got to drop. So, what you do is you hang on to something that's not directly overhead so much, it's more like in front of you, like a railing, a banister, a tree branch, something like that. And you just lean into it or you just put one hand up over your head and you don't completely hang, but you let some of your body weight go up into it and you'll work your way there. But if you can put your hands up over your head and hold on directly to a bar for two minutes straight, you're a monster. That would be the ultimate goal to do.

Dr. Joseph Mercola:

I pretty much do that every day.

Dr. Perry Nickelston:

Great.

Dr. Joseph Mercola:

And to go to three to five minutes, not it's a single, but multiple reps to get up to three to five minutes a day.

Dr. Perry Nickelston:

That's fantastic. Yeah, if you could get most humans to do that, it would be a game changer for them in so many different ways. Throw that hanging in with your beach routine.

Dr. Joseph Mercola:

Yeah.

Dr. Perry Nickelston:

Yeah.

Dr. Joseph Mercola:

I'm a big fan of dead hanging for sure.

Dr. Perry Nickelston:

Yeah.

Dr. Joseph Mercola:

And then you can level it up by doing one arm hanging, which is quite a bit more difficult. It doesn't seem as difficult, but it is. It's really hard.

Dr. Perry Nickelston:

Oh, yeah. Oh, absolutely.

Dr. Joseph Mercola:

It's hard to even get 30 seconds with that one.

Dr. Perry Nickelston:

Yeah, you probably find it, most people when they're beginning to get into this stuff, they've never done any hanging before. And then to try to reach some big target of a two-minute, hashtag beast mode, monster hang when you never had done hanging before, you're probably going to hurt yourself. So, you got to go in it easy.

Dr. Joseph Mercola:

Yeah, you got to start small. But yeah, for sure, especially if you're overweight as most people are, we got 40% of many states being overweight and certainly more than 30% of everyone being obese.

Dr. Perry Nickelston:

Yeah, that'll be tied to lymphatics too. Yeah.

Dr. Joseph Mercola:

Yeah, for sure. That plays a role. So, you've been doing this for a while, have you seen any recent innovations that you're excited about?

Dr. Perry Nickelston:

Well, I'll be honest with you, the excitement is that medicine is actually beginning to pay more attention to lymphatics. So that in and of itself is a check the win box. One of the reasons that they're starting to look at it, I'm finding, is because people make such significant changes and improvements when you start to work the lymphatics. So, they'll say, "Wow, we should take a closer look at this." But I think what's moved the needle is what they're finding in relationship to the lymphatic system and the brain. Okay? Because you have this lymphatic system, which we're not going to get into here, the glial cells, the immune cells of the brain, lymphatic system that's there and along the meninges covering of the brain, they have to work directly with the lymphatic system below it. So that's why they're going to drain into the lymphatic systems of the neck, the deep cervical lymph nodes in the neck. And then what we'll find that we often forget in medicine is that you can't separate systems, you can't separate tissues. That the lymphatics are going to tie into the lymphatics.

So, what they're finding in relationship to the brain, neuroinflammation, neurodegeneration with Alzheimer's Parkinson's, MS and the fluid waste management system of the body, they're tying it more to lymphatics in general, which is great. So that's what I'm most excited about. And then that'll pull the thread on them looking at the lymphatic system's role in other conditions, other diagnoses that might seem unrelated to the lymphatic system because you don't have lymphedema or cancer, but what I tell everybody is I always refer back to fish tank. If you have inflammation in the body that can't get out and you have trapped waste, particularly metabolic waste and cellular waste of your own cells dying as well that can't get out, you're going to end up having inflammation. And that inflammation can manifest in many different diagnoses names. But to me, it doesn't matter because I'm going to clean your fish tank regardless of what name you've been given as your diagnosis because focusing on the fish tank.

Dr. Joseph Mercola:

Yeah. One of the other ways you can do that is a process called detoxification, and certainly lymphatic massage and movement can be part of that. But one of the primary strategies that most clinicians I'm aware of utilize is a sauna, typically far infrared, where you're getting the body heated anywhere from 140, 170 degrees and then sweating. That's the key issue, is raising your internal body temperature that you're able to excrete the toxins through the sweat glands. So, I'm wondering how the lymphatic approaches would integrate into saunas or specific timing where you think it would be valuable to do this six phase lymphatic massage in the right sequence prior to the sauna, during the sauna, after or all of the above?

Dr. Perry Nickelston:

Yeah, I always tell everybody big six comes first before anything, always comes first. Because you want to free up those deeper lymph node channels because the lymphatic system works like I want you to think of a tree. You have the leaves of the tree and then you come down into branches, then you go to bigger branches, then you go to the trunk and then you go to the roots.

That's the same way it is with a lymphatic system. So, at the skin, you also have a ton of lymphatics, but that's the end point, that's the superficial lymphatics. And they're going to drain down into the deeper lymph nodes that we showed you with the big six and then they're going to ultimately drain into the deep, deep lymph nodes that we mentioned before along the spine and in here.

So sweating is great in the sauna, but I'm going to contend there's no way you're going to sauna yourself out of a deep lymph block. That's the toilet that you got to get in there by hand, remove that, get those areas and then go in the sauna and then you'll have a different experience. Same thing if you do cold plunges or you do whatever. And I always, I have this people that do this, they try to do and do detoxification routines through nutrition and supplementation, but it's the same thing. I would coincide that in relationship to doing the lymphatic work at the same time.

Dr. Joseph Mercola:

Yeah. Well, it sounds to me even the more ideal approach would be take your detox protocol, I like working out before the sauna, take your detox agents, which would be things like activated charcoal, which is particularly useful for binding endotoxin, which is a byproduct of an imbalanced gut flora, typically too many oxygen tolerant bacteria, which are the pathogenic disease causing bacteria. And the other thing is you could do this six, what is it, the magic six or the deep six?

Dr. Perry Nickelston:

Big six.

Dr. Joseph Mercola:

The big six, the big six.

Dr. Perry Nickelston:

But magic six works great because it's like magic.

Dr. Joseph Mercola:

Yeah, use the magic six and then a rebounder and then you progress into the sauna. And that would be sort of a near optimal experience if your focus is on detox. Would you agree?

Dr. Perry Nickelston:

Yeah, that's an absolute fantastic sequence. And then what you'll need to be cognizant of is that when you, so you're going to have a lot of stuff that's been trapped in your body for years, if not decades. And then when you open up these channels, things are going to make their way from the interstitial fluid now into lymph nodes and they're going to try to get out, so you're going to activate your immune system. So, you're likely going to go through what some people call a detoxification reaction because now things are going to come on in and try to eliminate the stuff that they just found and now registers in the lymph nodes until they get out. So, a detoxification when you begin lymphatic work is quite normal. Sometimes it can be pretty powerful when you do it. And basically, it's where, I always tell people it's pretty simple, you feel terrible, you feel

like it had a really rough night out, tired, fatigued, lethargic. Sometimes your pain gets a little bit worse before it gets better when you start to move these things around.

And that's expected and normal. And you also have to remember, like I said before, that you're not just influencing lymph flow here. You're massively changing vascular flow. So, you're probably going to now get blood flow to and away from an area that's been hypoxic for who knows how long. And then things are going to start to change now that fluids are moving. Because it's going to be really difficult, if not impossible to heal when you have stagnated fluids in the body because you just choked off the only supply chain of how stuff gets anywhere. The only way it gets anywhere in your body is through fluid. So you need to make sure that your fluid flow routes are functioning as optimum as they can. And that's what your breathing is trying to do, that's what your movement is trying to do, they're trying to keep your fluid flow routes open.

Dr. Joseph Mercola:

So, what we talked about-

Dr. Perry Nickelston:

Does that makes sense?

Dr. Joseph Mercola:

Yeah, it makes sense. We talked about earlier the symptoms of lymphatic stagnation was, we mentioned that, but I don't recall you mentioning pain or chronic pain, but from your-

Dr. Perry Nickelston:

Yeah, pain could definitely be one for sure.

Dr. Joseph Mercola:

Yeah. So why don't you talk about that? Because you didn't mention it earlier and it seems like it might be a major factor that might catalyze people to consider this as a possible solution.

Dr. Perry Nickelston:

Sure. I don't want to go too deep in the rabbit hole on pain because that's a week-long show on that one. But in relationship to, let's talk about fluid flow. So, whenever you're going to have a decrease in the lymphatics being able to get out, you're going to have trapped inflammation around the interstitial fluid because it's stasis. Okay, there's an actual term for it called interstitial inflammatory stasis.

Dr. Joseph Mercola:

I suspect that would build up pressure. And typically, anytime you have pressure in a body, even it's a very small area, it could be literally a few millimeters, that can cause intense pain.

Dr. Perry Nickelston:

Correct.

Dr. Joseph Mercola:

Because your body doesn't like, does not enjoy concentrated high-intensity pressures localized at all.

Dr. Perry Nickelston:

Exactly.

Dr. Joseph Mercola:

Yeah.

Dr. Perry Nickelston:

Yes. So, you'll kick off some of those mechanoreceptors and baroreceptors and pressure receptors and you'll kick off inflammatory cytokines that get released from the inflammation, and those can kick off signals into the surrounding nociceptors, the centers detect threat around cells of the body and tissues of the body and they're loaded around pretty much everything, particularly blood vessels. And that stasis, that inflammatory interstitial stasis, releases all of that and it starts to send these nociceptive signals up into the brain. And then once the brain hits enough of a threshold, enough of that coming in, then it can kick off a pain response can be the output. But what you'll also find is that when you have so much inflammation in the body, and even maybe inflammation in the brain and poor blood flow into the brain because of lymphatic stagnation, you lose the ability to efficiently activate the pain inhibition pathway.

So, it's not just more signals coming in that cause pain, you actually can have an issue with the body's ability to inhibit pain itself. So, it's both. And then these areas that have that stagnation will end up having decreased perfusion of blood flow and venous stagnation, and that will lead ultimately to hypoxia and neuron death. And then nerves will sense that hypoxia and they'll usually start increasing their firing pattern and you get what they call central sensitization. You become very sensitive to things that are input into the system and everything hurts. And then like we mentioned before, if you have the lymphatic stagnation along the spine itself, then those nerve roots become sensitive to everything coming into itself and they react to everything. So, pain is a complex puzzle for sure.

And they say pain is in the brain. That's what they say in neuroscience, it's in the brain, not the tissues. Well, then you better make sure that your brain functions well. And the first way I'm going to do that is make sure it's got blood flow in, it's got good blood flow out and you don't have lymphatic stagnation in your neck and around the meningeal lymphatics. Because if you have that, then you're going to struggle to inhibit pain. So that's why lymphatics in my world are not just about swollen body parts, it's about improving every single aspect of your body and it's quest to heal, recover and regenerate and not be in pain.

Dr. Joseph Mercola:

Well, that's just terrific. I really appreciate your insights on helping us understand the connection between lymphatic stagnation and so many different areas of your body that can benefit and improve from addressing this. And some very simple strategies, really simple, inexpensive and not terribly difficult to do at all, but it could have some fairly profound implications on your long-term health and enjoyment and ability to experience life at its fullest. So I'm wondering what type of resources you have for people to consider? Do you have books, websites, social media? How can people find out more information about what you're doing?

Dr. Perry Nickelston:

Thank you very much for that. I appreciate that, doc. Thanks for having me on your show. I had a great time. And like you said before about simple, I always say that effective things don't have to be complicated.

Dr. Joseph Mercola:

Yeah.

Dr. Perry Nickelston:

Pretty simple and profound when you begin to do it and make a shift in how you feel. But yeah, you can find lots of resources on our main website, stopchasingpain.com, a lot of content there for free. I'm on all the platforms that you can find information and we do have workshops and self-care videos. And then I have a book that's actually being in the works right now, so that'll be coming out next year, I'm excited to say.

Dr. Joseph Mercola:

Oh, good. Good. Always a big fun experience writing a book, that's for sure. I've done enough of those.

Dr. Perry Nickelston:

Oh, yeah. There's a lot more to it, I'll tell you. Yeah, it's a big thing.

Dr. Joseph Mercola:

Yeah. All right. Well, just to thank you so much for your efforts in this area to help people understand what might be contributing to their dysfunction and pain and ability to enjoy life at its fullest. So, I think many people appreciate your kind and persistent efforts to help resolve some of these challenges.

Dr. Perry Nickelston:

Thank you very much, doc. It's a pleasure.

Dr. Joseph Mercola:

All right. You're most welcome. Bye now.