
THE NATURAL EVOLUTION PODCAST | SEASON 1: EPISODE 22
GUEST: MELISSA TOVAR

PODCAST TITLE: Someone in My Corner with Mellissa Tovar

PODCAST DESCRIPTION:

Mellissa Tovar was born and raised in a small northeastern Wisconsin town, where her family owned a small dairy farm. Although she had many fond memories of her home and family, she also had much pain and hurt held inside. Growing up with people that weren't able or willing to understand that she was always in physical pain made her feel that she was a burden-low self-esteem and depression became a part of her life at a very young age. She wrote her first "goodbye" letter around the age of 10. At the age of 16 she was in a car accident that caused severe whiplash and whiplash associated disorders-which she is still dealing with 30 years later. After graduating high school, Mellissa went on to college and received associate degrees in accounting, business mid-management, and computerized accounting. She was a nanny, business owner, an abider for hospice, and a restitution coordinator for the WI Department of Corrections. In 2011 Mellissa moved back to the country to heal both mentally and physically. Unfortunately, it took another six years before Mellissa was able to truly start to heal her body, mind, and spirit.

After many decades of health issues, Mellissa found that she couldn't function anymore. It was at that point that she was led to Dr. Meyer. With his help and guidance Mellissa has overcome many physical and emotional traumas. She claims that it was after their first meeting that she felt that her true health journey began. This journey has encountered many twists and turns, but she has learned so much. This journey started by learning what real health was and how she had the power to help make her life better through simple actions. She believes that learning and implementing NET, brain plasticity exercises, better nutrition, and vagus nerve therapy helped her to achieve weight loss, ease her depression, heal from traumas, and learn how to love and accept herself. "Caring for others has always been in my nature but caring and loving myself has not always been so easy. There are many days that are still challenging, and I may take three steps forward and two back, but at least I am still one step further along than yesterday. One of the most important things that Dr. Meyer gave me was hope and that is what I wish I could bring to others."

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A Podcast Launch Bestie production

PODCAST TRANSCRIPT:

Michael:

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Hello, and welcome to the Natural Evolution produced by Rebel Health Tribe, a radio show focused on providing you with inspiration, education and tools for true healing and transformation. I'm Michael and I'll be your guide on this adventure as together we explore the very nature of the healing journey. We're live here and it is another one of our Rebel Health Tribe community episodes which actually have been the most fun ones to record. And I am here with Mellissa, Mellissa Tovar, thank you so much for coming on and doing this.

Mellissa:

Thanks for having me.

Michael:

I can tell that it's going to be really impactful and helpful for people. And I just appreciate you openly sharing your story with us when we asked for submissions and honor all the work that you've done, because it's been no short journey for you. And we can get right into it. So, I think starting would be, you grew up on a dairy farm which Mellissa is in Wisconsin and we spent some time chatting before we came on. I'm from Illinois. So I was kind of reminiscing about my trips up to Wisconsin to the forests and the lakes and coming home with bags of cheese and sausages. But you grew up on a dairy farm?

Mellissa:

Yes, well, family farm.

Michael:

Okay, sometimes some of the episodes people had like, they are 22 years old and then all of a sudden their energy drops. And they feel like how your stuff, everything that you've been dealing with pretty much as early as you can remember, right?

Mellissa:

I have like a pain disorder. Nobody exactly can tell me exactly what it is. But my mom said that before I was at the age of three, she would try to hug me and I would hurt, I would pull away. And I remember just always hurting. And eventually, when I was like 16, they said, oh you just have fibromyalgia. Don't worry that's just the way it is. It affected everything. It affected family, it affected school, it affected everything.

Michael:

And this was just generalized pain, your body just hurt.

Mellissa:

Yep, just generalized pain just to have somebody touch me. When I was in first grade I actually told my mom that I wished I had cancer. And she looked at me and she's like, "Why would you say that?" And I said, "Because either then they'll fix me or I'll die." Because I was so tired of

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hurting not being able to do the stuff that other kids did. And just the drama within the family that it was causing was just too much for a kid.

Michael:

Yeah, and probably felt like a hassle or a burden on everybody else. And they had to deal with you and handle your issues, right? Like that was-

Mellissa:

I'm the youngest of seven. And then my oldest sister and I are 21 years apart. So she had kids before I was even born. So, I was an aunt for a year before I was born. And her second daughter and I are like three months apart. So they were always around. And so, it was always a lot of people and it was like-

Michael:

A niece that was your own age that you kind of grew up with?

Mellissa:

Yeah, one is older and one is the same age.

Michael:

Okay. And this was constant all the time or did it come in flares? Or was it....

Mellissa:

There were the days where it would hurt just to move. And then there was the times that anybody would touch me it just hurt too much. So anytime anybody touched me it hurt too much.

Michael:

And the doctors had nothing for that?

Mellissa:

No, I was told everything from she's faking it, she just wants attention, to arthritis. I did have one doctor that tried real hard when I was growing up. Of course, he's passed away now. But he always felt that I had the lupus. But the tests always came out negative. But he's always very caring and considerate about things so.

Michael:

That's something that I think gets overlooked often. I know a lot of really good practitioners who are excellent with lab tests and with diagnosis and with treatment plans and things. And then when they interact with their patients it's very clinical, and it's very mechanical. And I think that like even though it sounds like that doctor wasn't really able to figure out exactly what was going on or get you out of pain or anything, that there is a benefit there just from him caring. And like

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seeing you and acknowledging what was going on. I think a lot of people out there listening who have had pain conditions. I'm sure every single one of them at some point has been told that it's just in their head.

Mellissa:

Yeah, pretty sure.

Michael:

Like when the doctors can't figure it out that's what it goes through. It's always just in your head or it's psychosomatic. And there is truth to things being psychosomatic, but the way that is presented to them puts it on them, like you're creating this. And to have a doctor see you and understand and really be caring and try to do what they can do is worth its weight in gold from my experiences. Obviously, you want the results to be there too. And I think just being seen like that. So that was I mean, pretty much your whole childhood was in this pain condition. Like that went through high school that went...

Mellissa:

Till now, even now, you have a lot of the pain problems.

Michael:

Okay. Well, we'll get more to that in a little bit about now and like what you've done and where it's at now, but you went to college in Milwaukee?

Mellissa:

Yes, was going to college there after I went to [inaudible 00:05:40] for a little bit to move to the big city. Because our town is like 350 people so I wanted to try. And I had complete culture shock when I went down there. Ended up meeting lots of different people, it was an experience. Unfortunately, I was a little naive and ended up being raped at one point, thought I did pretty good with that. And then over the years, I've had car accidents when I was 16 actually had one of the worst car accidents I had and that affected things.

Michael:

Oh, yeah.

Mellissa:

I'm still having issues with that. Yeah, when I was 16 we had that car accident and I had severe whiplash and concussion. And like two and a half days afterwards, I started having tremors and shaking. And to this day, if I go to the chiropractor and get my neck or spine adjusted, it will cause me to start shaking. Nobody can tell me why. And the electrical feeling in the spine and things like that. That's just been there since that car accident. So we're still trying to search Dr. Meyer helped me. Some they found if they give my neck traction, it makes it better. They can pull me out of certain things.

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Michael:

Interesting.

Mellissa:

But we don't know what it is. I mean, I just had some sitting MRIs done. And they found that I've got like eight bulging and ruptured discs throughout my spine. But that doesn't exactly help with the shaking. Dr. Meyer found me a quantitative EEG. Because everybody's telling me, it's in my head. So I thought, well, this should show up different colors. It should give me some direction. And so, when I talked to the gentleman in Waukesha he said, "Well, now we can try it." I actually brought an electric toothbrush because that will cause me to start having them, the vibrations. So we did-

Michael:

Just holding it or putting in your mouth?

Mellissa:

Bleeding on my gum, in my mouth on my gum. So whether that's the trigeminal nerve, what we don't know. So he kept it running. And he said at first it was normal and then he said, he's never seen anything like it. So he sent it out to Nevada. And it came back and that gentleman said that is not pseudo seizures. He says "There is something definitely different going on." But so far the doctors around here they are doing the oh, it's psychosomatic, you're causing it. Even though the psych world says no, there's something wrong. So because they can't figure it out.

Michael:

And that's all since the accident at 16.

Mellissa:

Yep.

Michael:

Okay, so there's the accident. And then obviously, I've seen what pain conditions can do to a person in a short amount of time from a mental standpoint and emotional standpoint. And like, I can only imagine what it's like to go through it for a decade as a kid and your whole childhood and then the car accident, and then the experience at college. And there's a lot there. Like that's a lot for a young person to carry and to have. And did you stay at college? Did you leave Milwaukee?

Mellissa:

I was going to UWM and then I transferred out to the tech school. I got an Associates in Accounting and an Associate in Business Management. And then I ended up actually working for the state of Wisconsin in the Department of Corrections. So that was interesting. You never know what you're going to find happen that day but eventually I got married. Week after I got

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married that turn to complete hell in a handbasket. Got divorced about two years later, because of the abuse that was in that situation I ended up in the hospital, tried to commit suicide, almost succeeded. They said that another minute or two if my mom wouldn't and found me, it would have been done.

Michael:

This was 2007?

Mellissa:

Yep, married in 2006. And then 2007 in December when I attempted. So that was a road that was going in and out of the hospital. So I also started to cut at that point because I felt nothing. Never felt when I cut. It was like the only way I knew I was alive was by watching the blood come out. And I know some people don't understand that.

Michael:

I didn't understand that and then I started studying a lot of things around mental health and emotional health and trauma and self abusive behaviors and self harm. And that's pretty much uniform what everyone says about it is that, it's the only way they would feel alive. And it's the only way they could tell they were alive, is the only way they could feel anything, it's the only connection to being alive.

Mellissa:

Right. I went to work every day and nobody knew. But I mean, there was days I would go into the bathroom. And I would open up my wound until I would start to feel dizzy from the blood loss. And I was like, okay, I'm alive, I'm okay. And I'd go back out there and do my job. And at one point I'd lost over half of my blood supply. But since 2010, I haven't cut except once, I had one screw up. So had like six stitches. But otherwise, I've been doing pretty well on that. And that's something that comes and goes, it's not something-

Michael:

Have you been working with somebody like mental health professionals, therapists, counselors, like is that been involved in your journey at all?

Mellissa:

I was involved with that a lot after the suicide attempt. And even when I was younger after the car accident, because I had become really depressed and just not myself. I had started to see somebody then. But in 2007, after that incident I was in and out of the hospital a few times. And eventually the psychiatrist told me he says, "Mellissa, you need to go home." He says "You've got the tools." He says, "You're not meant for the city." He says, "You need to go home to the country." And he says, "I think you'll heal fine. And you'll be fine." So, I'm now off of all my psych medications. I'm actually since working with Dr. Meyer, I've actually been off of most of my medications. So it's been a journey, but it's still going but it's been better.

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Michael:

Okay, we'll talk about Dr. Meyer and your approach there in a minute. And that's your local doctor that you found that's been a huge help. Well, local-ish. Green Bay, how far is Green Bay from you?

Mellissa:

It's about 45 minutes.

Michael:

Okay. And your story that you shared with us it was when your great niece was born, that helped kind of turn the lights on for you a little bit, that kind of helped flip a switch in you that provided you with some hope and some inspiration.

Mellissa:

I held her, I was there and I got to see her be born and got to hold her and they had made me her guardian in hopes that it would help give me a reason. But holding her and seeing the wonder and just the whole birth process. And just at that point I decided, okay, I'm going to do my darnedest and I'm not going to cut anymore. And that gave me the incentive I guess you could say because I want it to be around to see her grow up.

Michael:

And that was around the time you moved back from the city to the country.

Mellissa:

I moved back in 2011.

Michael:

And that was 2010. So the great niece was first then you moved back?

Mellissa:

Yep.

Michael:

And you found this source of inspiration like really just kind of shifted your perspective on life in general and what's important. And it sounds like it's kind of the first time that some like hope and optimism kind of snuck in to the mix. And was there an immediate impact after that experience with your great niece to where some of the depression or the cutting or any of those things shifted or?

Mellissa:

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The depression got better, the cutting, some days it was really hard not to. But it felt like since I would think about her and look at her pictures and whatever, it helped me push that feeling aside a little bit and to regroup. Knowing this is why I'm doing this, this is what's out there. So it just gave me some hope.

Michael:

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I just want to honor like how hard all of that is and what you've been through. And I can't imagine some of those things, like I'm not going to pretend like oh, I can relate to your story. Everybody has their own stories, everybody has their own journeys. This is an exceptionally challenging one. And I just want to recognize that you've been through a really hard wringer. And that I don't have anything else to say other than that it's really hard, like what you went through is really hard. And I'm glad that she was born when she was and that you made the decision to go home because it sounds like leaving the city was a really good call for you.

Mellissa:

Definitely.

Michael:

It's not where you belong. And I've been places where I don't belong. And I've immediately been, I know what it's like to be in a place for you feel like you don't belong. And like that just adds another layer of stress and anxiety and everything else. And so, it sounds like she was born at the right time, you went home at the right time. And this is when you found Dr. Meyer and how did that happen?

Mellissa:

I was in one of our local hospitals with my walker. Really bad that day and I walked into an elevator and there was a lady standing in there. And she said, "You look horrible." And I thought, gee, thanks. And she says "You need to see my chiropractor." And I thought, "Okay, I need somebody anyway." So she told me his name. Dr. Christopher Myers told me three times. I said, "Okay, I've got it." And I turned push the button. And I got to the floor and I moved for her to walk out. And I looked back and there was nobody there. So I thought, okay, I'm hallucinating. I thought, too much medication. And so, I left and his name stuck with me. And I thought I am sure it was just my brain screwing up and kept his name is still there.

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I finally looked it up and he was real. So, I walked in there when I made an appointment. And at one point he did ask me how I found him. And I told him and he started smiling. And he says you're not the first one to tell me that story. I thought well, that's all right. Let's get to work.

Michael:

That's amazing. Yeah, so that's incredible. And that was 2016. So, only five years ago and you were using a walker. Was that from the pain was it from?

Mellissa:

It was from the pain and I've had one spine surgery. I've got a lot of degenerative discs and things like that going on.

Michael:

So, it was just basically helping with supporting you while you walk.

Mellissa:

Yeah, [inaudible 00:19:12] and mobile.

Michael:

Okay, and that probably wasn't easy to walk in there either. Like, you've probably seen a lot of doctors, a lot of people, a lot of medical people and-

Mellissa:

Oh, yeah. I just kept thinking maybe, maybe this one is going to help. And that was the best decision I ever made was to walk into his office.

Michael:

So he's a chiropractor and it looks like he's into some interesting stuff. Before we even went on air I've already asked for an introduction. So, maybe we will be able to talk to Dr. Meyer too I think that would be fun. Maybe we'll have him on our podcast. And it says in here that he introduced you to us. So, I think that would be fun to what we're doing here. But you mentioned NET, HRV, brain plasticity, meditation or mindfulness I guess, and breathing. There's a book out right now I'm just going to throw in a plug called, I think it's called Breath by James Nestor, he's a journalist. And it shifted the way I view breathing in breath like entirely and how powerful that is to modulate the nervous system. And oxygen is important, and often and we're breathing shallow and it's only going in a little bit. So I'm sure that he was working with you on like breath mechanics and kind of using the breath to regulate your system.

Mellissa:

We started with the NET right away the Neuro Emotional Technique.

Michael:

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You want to share a little bit about what that's like as a patient or going through it?

Mellissa:

He explained it to me, he says that every cell has a memory. And that technique helps clear those memories. And through that he used muscle testing. He's got certain meridians and different things that he uses that he's been taught. And he would ask certain questions and then my body, I would respond. And we just kept going from there. So there was no pain, there was no anything, he would ask me a question, what do you want to work on today? And then some days I would start crying, but every time I would leave his office, I've always felt like there was a weight lifted off my shoulders. And like things were clear. So with his help I lost 150 pounds because he's also a nutritionist.

Michael:

I'm sure that helps with the walking.

Mellissa:

Yep, I moved on to a cane. And then I try not to use the cane all the time but I'm still not good on no bumpy grounds and whatever but...

Michael:

150 pounds is a lot of weight. You made dietary changes with him and lifestyle stuff.

Mellissa:

He introduced me to Dr. Seaman's book, The Deflame Diet. And so, I went all I could on that. Started on the right supplements that he gave me and I just felt better. But I know that the NET was a huge component to it.

Michael:

Yeah, there's a lot of similar practices and modalities to NET and a lot of times it's very subtle when you're doing it. It's like I'm not sure if anything is happening right now. And then you kind of just notice over time like, I'm not as reactive. I'm not as depressed. I'm not as anxious things don't trigger me as much, like my body feels different. My internal experience of life shifts or is different. And those things can be super profound for people especially chronic illness, chronic disease because it turns off the heightened nervous system a little bit.

Mellissa:

I always thought that the vagus nerve mine wasn't working right. And so, he introduced me to Dr. Porges I think it's how you pronounce it, Polyvagal. And been working with that. And then he instructed me to read the Dr. Doidge a book, The Brain that can Change Itself.

Michael:

I'm bookmarking some of these as you're going. I'm familiar with Polyvagal and Porges. That book is impossible to read by the way. Porges' book, Polyvagal was written for like neuroscientists, I started to read it and I was like, and then I found the work of a therapist named Deb Dana who writes approachable polyvagal stuff. So, if anybody out there is listening there's a book called I think it's Polyvagal Theory for Therapy or something. And it's written for therapists, but there's a ton of exercises and things in it that it's approachable for the layperson whereas Steven Porges' book, if anybody hears Polyvagal and goes and Google Steven Porges, he's a genius. They figure out something awesome. And he's a researcher. He's not a journalist or a writer. And his book is written by a neuroscientist. That's just how I put it, I got like 30 pages in and I was like, man, if my brain is melting like this trying to read this stuff like this is not approachable.

So, don't jump right into Steven Porges' book, I'm just throwing out a disclaimer. But that stuff's really important to understand because then you start to understand like, the body responses that you're having, and why or how or some of the physiology behind it. And then more importantly, small little adjustments or changes you can make or actions you can take or exercises you can do or ways you can breath right can shift that, right?

Mellissa:

Right, so after The Brain that Change Itself book then that brought me into the brain HQ or the games and things. So I started doing that and I started realizing my attention is better, my brain started to work better. And then with Dr. Meyer teaching me how to breathe correctly, to get my breaths better. So like you said this is not so shallow. But actually he's a chiropractor, we didn't actually do an actual adjustment until like 2018 or so.

Michael:

Wow, I think a lot of chiropractors, like chiropractic was their gateway to working with healing in general. So that's probably what he learned first. As you go to chiropractic school, you learn the adjustments, you learn in chiropractic, and then so many of them get into so many different modalities and ways of healing that half the chiropractors I know don't even do adjustments anymore. Like, it's not that they don't think they're valuable. It's just that they focus their attention more on other things. And that the chiropractic was like their gateway to healing practices, but it sounds like he's one that never stops learning.

Mellissa:

No, he reads. If I could have 10% of his brain power it would be amazing. But he was with me through the Lymes disease, through the mold toxicity, he helped me through allergies. I mean, the techniques and things that he's shown me has just helped so much.

Michael:

We'll put a link to his site too. Is that GBchiropractor.com?

Mellissa:

Yep.

Michael:

Okay, cool. That's the right guy then. Yeah, and you mentioned heart rate variability, did you start tracking that or what was-

Mellissa:

I started using the polar device, he started doing that in the office with me. And then-

Michael:

Kind of teaching you how to modulate it a little bit?

Mellissa:

The breathing and seeing how it would change and stuff like that. And he got me with a polar device and now I also got the aura ring I guess it's called, sleep monitoring and all those other things.

Michael:

Those are interesting because you'll notice your sleep quality goes down if there was like a high stress incident or something and it's not something you would usually notice. And for some people getting that feedback of data that gives you like a physical thing you can see that says like, "Hey, you did too much yesterday and your sleep suffered because of it, or you stayed up late last night and look what it did to your sleep." Like, for a lot of people that can be a very valuable kind of nudge or feedback too, it's real time feedback. Like what you're doing is it working or not? Because heart rate variability is like the more they learn about, it's one of the more important markers to measure someone's like overall state of well being. Like for athletes they use it, where if the heart rate variability drops it shows they are probably overtraining and they're not taking enough rest, or they're training too hard or whatever it is.

And for people with chronic health issues, it's like, the higher the heart rate variability goes, the better the state of wellness the person is in. The things that they're trying are working, like are their body's responding to them?

Mellissa:

The one thing that I've also found is that I can use it for after I eat something, how my body changes and reacts to it, my heart rate variability will go down.

Michael:

If it's something that your body doesn't like.

Mellissa:

Right.

Michael:

That's interesting, cool. There's the aura ring is one way to do it. I use a HeartMath device. HeartMath is a really interesting organization that's been studying heart rate variability and heart mind coherence for 35 years. And they are head of research, Dr. Robin McCrady, did a presentation for our brain and neural masterclass last year. And it totally blew my mind. Like there's way more to it than just heart rate, like heart rate variability is cool. And the states that you get brought into that are optimizing that. They've even proven in research studies that if you learn these practices of what they call coherence which is probably what he was teaching you with breathing and stuff to bring your heart rate variability to a higher level. It can influence the heart rate variability or coherence of those around you.

And so, they did a study where they had I think it was, I might butcher this a little bit but they had six people at a table. Three of them HeartMath had trained as far as how to do these practices, three of them had no idea why they were there. They measured the heart rate variability on all six people. And at one point they gave a silent signal that the three people who didn't know what was going on couldn't see it or hear it or have any idea that anything happened. They gave a silent signal to the other three people to put themselves into a state of coherence through the practices that they were taught. And the heart rate variability of the three oblivious people went up with there's like at the same time because it's a proximity thing. And that our hearts are electromagnetic radiators essentially like they radiate electromagnetic energy, and that those fields interact with each other.

And that's why when somebody comes in a room and it's a certain type of person, you either feel this like incredible weird energy, or you're like, I got to get out of here this is bad. And the same thing goes for rooms of people or places or cities or whatever. And they are starting to show that in the lab and being able to demonstrate it and show it like, unequivocally no argument like this is what happens. And when he was showing me that I just couldn't believe like it's so cool. It's like it backs up with science what certain traditions have been talking about for...

Mellissa:

There's so much that they don't know yet and it's amazing what they're finding out.

Michael:

And we don't need to know why something works either for it to work. That's why I think we get stuck on that a lot. This culture, this society, like it's not official until like the scientists can explain to you the mechanism by where like acupuncture for example, helps tons of people with pain conditions and other things. We're still only beginning to even barely be able to explain or understand how it works. And so, there's part of society that won't accept it. Yet, my father in law had a debilitating shoulder injury recently like where he wasn't able to use his shoulder. Now, he's been seeing an acupuncturist two times a week for a month, his shoulder doesn't hurt anymore. Does he know how it works? No, does it matter? No. So it's cool. And a lot of these things that he had you going through are kind of on that line of like, we understand these things work. We're not really sure why, let's try this.

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And it says that by going through this and learning about these things, and this is what I found most inspiring of what you wrote to us is that he helped me find the courage within myself to be my own advocate. Because of him I found my voice and contacted researchers in Germany, doctors in England, physical therapists in California, EEG specialists and you've really become your own advocate. And doing your own outreach, learning your own things, reaching out to specialists and people that are doing things that you think could be helpful for you, right?

Mellissa:

Right. Now the Whiplash is so, it feels as though doctors write it off that you should have it for a little bit and when you're better move on. And there's so much more to it than that. And so, that's when I contact the specialist in Germany and he sent me some stuff. And he's like, we do things so different than you guys do. He says, if you were here, we would have you do all these different tests but we know that in the United States they won't do it.

Michael:

German medicine is very different.

Mellissa:

And through him learned more things, read more things. Learned about PRRT, I didn't know anything about that.

Michael:

What's PRT?

Mellissa:

Primal reflex release therapy, it's a type of a physical therapy. I've contacted to the gentleman in California to find out if there's anybody closer and now am going, I traveled on in Milwaukee twice a week. Well, I go down once and stay overnight and see him twice a week for that. And that's helped my muscles. Now, I wouldn't have known anything about that stuff if I hadn't-

Michael:

Now you have the confidence and capacity to do this kind of research, to do this outreach, to talk to these people where I'm guessing there's a point in your life where like, you would have never made that email or that phone call or-

Mellissa:

Oh, no, I was so, I don't want to say docile and just do what they say. And there was a point where I actually went to the psychiatrist and I said, I need you to test me. Do I have schizophrenia? Do I have personality disorders? What is going on with me? And they are like, "You really want to be tested?" I'm like, "Yes, test me. Tell me." And so, they did and they're like, "No, you're okay." I'm like, "Are you positive?" And like yeah, you've got some health issues that you just need to keep searching. And so, all these years later I'm finally doing it.

Some of my family thinks I'm a little off my rocker by all the things I've been watching and reading because they don't quite understand it. And a lot of them also don't understand everything I've been through either.

Michael:

And they can't and that's okay, like you're on your own journey. And we welcome everybody who is off their rocker around here. That's really what we've tried to create is a community of people who are all off their rocker trying to figure out the stuff that can help them. And I've bookmarked a whole bunch of things here that like I didn't even know about. And there's so much out there. And I feel actually like I'm supposed to tell you about something because I think for your pain conditions or your body, it's similar to what you just linked, the PRRT is something called counter strain. It involves fascia, it works with the fascia and it's like trigger points. And I don't really know how to explain it but I feel like it might be something for you to explore. I did a quick, I typed in trying to see if there was somebody, there's somebody in Gunderson, Wisconsin, and there are people in Milwaukee. But it's not something you have to do all the time.

And I've had a shoulder injury recently that I was worried I was going to have surgery on. The type of exercise I like to do is boxing and I couldn't raise my arm to here like my shoulder hurts so bad. And somebody said, "You got to try counter strain." There's somebody in your town you should go see them. And I'm like, if it's a torn ligament or something, like nobody's going to poke around on it and make it feel better. I know this. I have a master's degree in exercise physiology. I used to work in rehab. Like, don't tell me about some things because they were like, I don't know how it works. It's like they poke on you. And they touch things and then something doesn't hurt. I'm like, that doesn't exist. No, and then I searched and there's a guy like literally two blocks away from my house. And I'm like, okay, I have to go like I have no excuse. Literally, I can walk there. And so I went, I've seen him three times over the last six weeks. And my shoulder pain is about 80 to 90% gone.

And it's low impact, it's not like doing physical therapy things. It's literally just kind of like trigger point mixed with what and it works on the fascia and nerves and things. So just putting it on your radar and I'm giving a shout out to the counter strain practitioners out there. Because I was super skeptical and I was going to go get an MRI and go that whole route and whatever. And I'm just, I don't have to do that anymore. And I can do anything like I'm not limited. So, put it on your radar. You want to do some exploration I think it's something that seems to be pretty effective and a minimal amount of treatments too. It's not another thing to add that you would have to find your way to get to twice a week or anything like that. So, just put it on your radar their website for counter strain does that practitioner really act like up to date effective practitioner listings too because some-

Mellissa:

I'll have to see. But my physical therapist he does so many different things so I have to ask about it. Because he does fascia work and he's one of those physical therapists that you go there for your knee and He treats your entire body.

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Michael:

Yeah, I've run into that with this guy to yesterday half of it was on my ribs. And I'm like, "Why are you on my ribs?" And he's like, "Did you have some sort of gastrointestinal issues since I last saw you?" And I had food poisoning two and a half weeks ago for the first time. It was the first time I was that sick for 10 years. And I hadn't told him that and he was all poking around in my ribs and checking out my diaphragm and all these things. And he said, "Have you've been sick?" like, dude, come on, yes I have been.

Mellissa:

That's the same thing that Mark does. He's like, "What did you do here? What happened here?"

Michael:

And you probably didn't even remember then you're like, oh, yeah, I bang myself on this.

Mellissa:

Exactly.

Michael:

Yeah, it's magic. There's body workers and manual therapists that are magic. So, you now lost tons of weight, you're off the walker you got the cane. You've done all this reprogramming work with NET and you've done the heart rate variability and the mindfulness. Which mindfulness can be hugely beneficial for people struggling with any sort of conditions. It just changes the way you experience what's going on, really is how I explained it to people. And you're in more control over your reactions and how you see things and your pain. You said there's still some of the residual from the whiplash there, you still have a little bit of pain. To me I'm not a psychologist or psychiatrist, but you seem to be in a pretty, I didn't know you then I've never talked to you then. But it seems that on the mental side of things and emotional and like your just overall outlook is drastically different than it was five years ago.

Mellissa:

Oh, definitely. The brain fog is better. Before you would wake up in the morning and it would be like, oh, I woke up in the morning, and now it's like, hey, I woke up today, we're going to do this and that. The outlook is definitely better. Not saying that there's not bad days. But I think overall, it's just a more positive outlook that there is help out there you just got to keep searching for it.

Michael:

And was there a moment, was it like the first time you saw Dr. Meyer, or maybe the first time you noticed a symptom being better, or the first time you noticed the scale moving. You got a little glimmer of hope when your great niece was born and you move back away from the city. But it sounds like things really turned a corner when you started seeing this Dr. Meyer. And do you remember a moment or something where you were like, oh my God, this might actually, like

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something is helping me. I feel better, or there's hope, or the direction has changed or anything like that. Do you remember having an experience like that at all?

Melissa:

After my first visit with him and we went through everything. And I told him, ask me whatever you want I'll tell you anything. So I want to fix this. And so, we spent probably almost two hours I think that day. And when I left there was the first time that I actually felt like I have a tool now that is going to get me to where I want to go. And the NET after him asking certain things to my system and the way my system would respond. I would be like, that's not possible, that's not right. But it always came back that whatever he was asking, I don't know if that's going to make any sense to your viewers. But the feeling of the weight being lifted off the shoulders

Michael:

And somebody in your corner.

Melissa:

Right, somebody that was willing to take the time and walk with me through everything. And I didn't really have that before. Everybody wanted to shove me off to somebody else. The fact that he's opened my eyes to so many other possibilities. That's also a big thing. Because when you're down and you're depressed like that, you don't see the other possibilities, there really isn't any possibilities.

Michael:

For anybody who's not dealt with depression and I've talked more openly about mine on other episodes. I don't want to hijack any conversation here. It is like wearing blinders. And it's foggy blinders. You don't see everything that's outside of this and then what's in here is clouded as well. And if you've never experienced severe depression, amazing, great, awesome, good for you, that's fantastic. And if you have, I'm sure you can relate to that description. And I can relate to the oh, I woke up today too. Like being disappointed and then having to deal with whatever that day was going to be just really looking forward to when I got to go to bed again.

Melissa:

But then you like going to bed but then you don't sleep good anyway so [inaudible 00:43:22] anyway.

Michael:

Because my severe depression was coupled with like pretty vicious anxiety and panic. And that would come on at night. And so, I'd be exhausted all day, because depression is exhausting. It's physically exhausting to your body and your brain and energy and everything. And at night is when my anxiety and panic would kick in really hard. So then I would have trouble falling asleep. So, I would take a bunch of stuff to try to fall asleep or whatever. And then I would wake up at 2:00 in the morning. And then there'd be like the thought or the thing, or the thing that

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triggers the panic or the anxiety or whatever I was stressed about. And then 2:00 in the morning becomes 3:00 in the morning, becomes 4:00 in the morning, becomes stressed out that I'm awake and I'm going to be tired again becomes 5:00 in the morning. And then I would fall asleep. But then I had to wake up to do the things and then I'm like, and it was-

Mellissa:

It's a vicious cycle.

Michael:

It is, it's nasty. And it's like debilitating. And I was trying to work during that and take care of my wife who was sick. And every single thing you do is hard. No matter how easy it is. I'm listening to a book right now actually that's pretty cool. It's called *The Laziness Does Not Exist*. And she's a PhD that studies psychological things and says, there's a part in the chapter I'm listening to right now that talks about depression. And that when somebody is depressed, she went through the physiology of what takes place in their body, the body produces less energy, the body goes into less deep states of sleep, the brain can't focus its attention very well. And it just named off all these things. And it's like so the next time you think that somebody in your life that you know is suffering from depression is lazy.

And you want to use the word lazy, understand that their brain isn't working, that their body isn't working, that they are not getting sleep, that literally getting out of bed to take a shower for them is exhausting and overwhelming and everything. And please reconsider your use of the word when you're looking at people with depression. So I just want anybody out there with depression to hear that.

Mellissa:

So that was the one thing that when I was in the hospital after the suicide attempt, I went in numerous times just because the doc got to know me a little bit that was there. And at one point they are like, his words to me were, "Mellissa we've never had anybody quite like you come through here before." And I thought, okay, is that good or is that bad? And he says, "Well, you've never stopped working unless you're here." He says, that's amazing. He says, and then at one point, I had started a business during all of this. And he's like, "Do you have a website?" And I'm like, "Yeah." He seen and believed me. I showed him the website he's like, "Okay." And it was just, everybody does things a little differently I guess, we all react differently. Now to be honest, if I hadn't been cutting during that time, I don't know where I would have been. And I noticed some people that's going to sound really strange. But when somebody asked me about the cutting and I told them, the cutting is what actually kept me alive.

Michael:

Yeah.

Mellissa:

And I went in for stitches the one time and the lady's like, "Oh, you tried to kill yourself?" And I said, "No, this is just a cutting incident." And they actually called the police on me that night. And I'm like, I'm not suicidal. This is how I stay alive. And the police officer talked to another police officer right outside my room and they were making fun of me. He was telling the other guy about it he's like, "Well, she should just go home and drink." You know, that's [inaudible 00:47:10].

Michael:

[crosstalk 00:47:10] drink and beat your wife and do all those things that come along with alcohol.

Mellissa:

And at that point in my life I was not able to say something to them about it. Now, I will be able to say something to them. But it's just when I heard that and heard them laughing it was just another kick. They don't understand and so many doctors and medicals they don't get it. And instead of asking questions to learn more about it, they just want to put it under the rug.

Michael:

And I'm sorry that that happened to you. It doesn't surprise me. I wish it did but it doesn't with the cops. And I think a lot of it has to do with that our medical system operates in silos, doctors aren't trained in mental health, they are not trained in psychology, they are not trained in anything that has anything to do with that and then vice versa. The people on that side don't know anything about nutrition or health or anything else. And in the work I've been doing the last few years, there's one form of therapy that was really helpful for me it's called internal family systems or IFS. And it's based primarily around working with parts that like, when somebody does something like cutting or like drinking, or whatever behavior pattern, that's really a part of them that learned to do this thing in a way that was protective or supportive, or numbing, or whatever it is. Whatever the behavior is or the pattern is, the founder has even worked with serial killers and serial rapists and the worst criminals in the world who do the worst patterns of behavior.

And he's been able to work with them to find the parts that drive these behaviors. And he said, "I've literally never found a part that wasn't acting out of love for the individual, that it was always an adaptation." For people who do like violent crimes, usually, they were really abused as kids, and they have no control, they have no power, they have no power to control their environment. And so they become hyper power, it's to make safe like for a part of them, they believe that by doing these things they are controlling their world, their environment, like it's the only way. And I'm not defending serial killers by any stretch.

Mellissa:

Right.

Michael:

He found that these parts were always acting out of self preservation, out of protection, out of keeping them alive. And that it was actually a client of his that he was working with, he'll tell the origin story of really developing this form of therapy where he realized there are these sub personalities that exist within us that do these things. And because it often feels like I didn't even do that, like you'll do something and you're resentful that you did it. And it doesn't even feel like you that did it and there's often an inner conflict. And he's like, I was running into this a lot. And it was a client of his who her challenge was cutting. And that he discovered this whole thing when the part that was doing the cutting spoke up in the session separately from the girl. And it was like a shift in the voice. It was a shift in tone and he noticed that.

And then he started working directly with this part to understand what it was and what it wanted, and why it was doing what it was doing. And what they, the part and the girl, the team, was getting out of this behavior. And he discovered that it was a self preservation thing, it was that part was trying to protect her. And he was able to work with this part to help it realize that there are other ways to accomplish and that this behavior is outdated, it's not necessary anymore. And he was able to help her resolve the situation. But it wasn't through shame, it wasn't through guilt. It wasn't through making it wrong or bad. It was through meeting it with understanding, like compassion. I understand why you're doing this, because you care about her and you want her to stay alive. And that has shifted, just that story that I've heard from him as someone who doesn't have any experience with cutting, that shifted my whole perspective on it as a behavior and then also the self destructive behaviors that I have engaged in my life.

It's helped me meet them from a less, because shame and self judgment and self loathing is, that's what leads people to suicide. Like to me those are the most powerful hard emotions that there are is like shame.

Mellissa:

Well, like with my shakes that I have. I know that there's two different types. There's one that looks like a seizure. And according to the QEEG, that may actually be a seizure. But yet the doctors here they said they don't understand QEEGs. Like, okay, well, yeah, you're a doctor.

Michael:

[inaudible 00:52:19], right? Like the, is that-

Mellissa:

Quantitative.

Michael:

Quantitative EEG, okay.

Mellissa:

Yeah. And the fact that the symptoms that I have where I'll actually look like I'm having a stroke, I lose my facial droop, my arm will go, and it's all with the pain in the head. If I have pain in one way in one spot of my head, my tongue will flip the opposite direction. And it's all classic stroke

signs. And once all the pain goes through the head, then I'm fine again. My physical therapist Mark, Dr. Meyer, Dr. Lyons I'm working with, they've all been trying to figure out what exactly is happening. And I did get one MRI where they show that the perfusion in the white matter was off. But they waited long enough to do the MRI that I had started to get my speech back. And then they are like, "Oh, it's okay." I'm like, "Well, what happened over there though that the perfusion was off and I lost my speech for eight hours? What happened there?" And it's like, I'm still trying to find somebody who's willing to really take a look and figure out.

I know that the whiplash obviously played a big part of that. But what happened? Like the physical therapist, he can just move my head in certain direction and I'll start having loss of speech, and then he'll put me back into traction and I'm okay again. What makes the traction help so much? And they don't know, but because they don't know, it's, oh, it's all in your head. And so I'm hoping someday somebody is going to be... Because I cannot possibly be the only one. In fact, I know I'm not, there's one neurologist I went to see, she says, "Oh, I've seen a lot of people with this after car accidents." And she says, "It's all psychosomatic." I'm like, how can that many people have the same issues and the same-

Michael:

It is just because they don't know how to fix it. That's why they'll say, anytime I see a doctor resort to that they could substitute that with, "I'm sorry, I don't know how to solve this problem. And we don't understand why it's happening." And they could just say that.

Mellissa:

Well, she went a step further though, because she stopped herself. And she says, "Well, it couldn't be." And then she says, "Well, I've never seen it so it can't be possible." And I'm like, "Really, like you know everything?"

Michael:

Nobody's ever seen anything until it's possible, like that's just a general law of how it possible means. Like everything was impossible until the first time somebody saw it.

Mellissa:

Right.

Michael:

So man, but I can just tell your energy is not what you've described it was before. You seem like you're enjoying the journey a little bit now. And it seems like you mentioned at the end of what you shared with us that you hope to help other people at some point to go through some of these things. That you potentially have the ambition of, I don't know what that meant but that's what it said in there. If you're interested in working as a coach in some capacity or just being someone who shares information. But I've seen that so much in this world of health and healing and wellness is most of the people out there doing the work. It's because they went through something that forced them to do it. And then they learn all these things. And then it's like, well,

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everybody needs to know this. And you want to find the other people that are the people that your neurologist said and get them together in a group and share what's going on. Because I mean, why not? How keep it to yourself? Like you know what I mean?

Mellissa:

Right.

Michael:

So do you have some ambition to do stuff like that?

Mellissa:

I would love to be able to work with people. And I guess, just sharing what I know and what I've learned and just being there for people. Because so many of us don't feel like there's anybody there. They don't want to be told again that it's just in their head when they know it's not. And so yeah, I would love to be a coach or be...

Michael:

Sounds like a book in there somewhere.

Mellissa:

I love writing. My mom told me once she says "When you were born, you were born on TV." She says so you've got something, something is-

Michael:

You were born on TV?

Mellissa:

Yeah, the doctor was being followed around that day it was an anniversary or something. And I happen to be born and so they actually videoed it and it was played on one of the local channels up here. So she says it's just, people didn't realize she was pregnant. And then they're like, "You were on TV." And she's like, "You have a daughter." But yeah, that was a surprise that they didn't realize was going to happen. But she says it meant for something, something good was supposed to come out of it.

Michael:

Sounds like a book to me, like being seen or being understood or having somebody there with you. It can be like physically another person in the room or it can be listening to someone's story like this or reading a book. I know when I've read books or listened to interviews or anything and I come across somebody that I can really relate to their story, it has that effect. Even though I haven't met them, I haven't talked to them, they don't know I exist, I just read their book or whatever, it chips away at that feeling of being alone. And I think that when science finally catches up with reality a little bit they are going to realize how catastrophic that feeling of being

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alone is to our physiology like that isolation and that aloneness and how powerful it is when we chip away at it. Like how you felt when you left the doctor's office the first time and were like, I have somebody that's in my corner, I have an advocate.

I have somebody who just sat there and listened to me for two hours. I remember my first experience with a practitioner that spent 90 minutes with us when my wife was sick or two hours or something. And it's like, oh, wow, this person really cares if I get better. They are going to go to bat for me, they are in my corner. And that is just huge, that happens. Like, there were changes to your physiology then and you hadn't even started doing the things yet. Like that's it.

Mellissa:

And that's the one thing what Dr. Meyer even now after all these years, if he finds something that he thinks would be interesting for me, he sends it to me, just like finding new guys. He thought the autoimmune would be good for me to learn about since I do have the hypothyroid and everything. And so he sent it to me and when I go there, I was there a couple of weeks ago and he's like, "Oh, you got to look at this. I read this today, or I read this." And knowing that he believes in me I guess you could say. That he knows that I can handle this, I can get better, I can learn how to handle things. It makes me feel like I can do this. He gives that little positive push, and I don't think he even realize he does.

Michael:

Yeah, you doing the things is half the thing. And him being there in that way is half the thing as well, it's just so powerful. And hopefully hearing your story is going to be that thing for some people that they hear today. And so, just knowing that if you're finding yourself in this hopeless situation, there's ways through it and there's ways out of it and things can shift and things can change. I'm sure you now would have some words for you six years ago that would be... And I know personally, that me, in my worst times would probably not listen to now me anyway. But just meeting that part of us and that period of our life with like compassion and being like, man, that was really hard. And here we are. And so, I'm glad that you found your way. And I'm happy that you're part of our community.

And I'm grateful that you decided to share your story. I know that I spend a lot of time on webinars and podcasts and interviews and videos and things. So, I forget that this is a big deal. I've never done this before neither I have a whole lot of people. And it's powerful to do it. It's powerful to share. It's powerful to be heard and be seen. And I think you did a great job. And this is exactly what people need to hear so.

Mellissa:

Thank you, and thank you for everything you do. Because I did read your bio that you had written a while back and everything. So, knew you can understand different things, different aspects because you've been there. You're The Rebel Health Tribe, and everything that you guys do gives people a lot of hope and a lot of knowledge. So, thank you for all of that.

Michael:

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Awesome, thank you. Stick around, be part of our community and don't be a stranger and everybody out there just keep moving, keep going. Keep looking, there's answers out there. And we'll do what we can to help you find them. So, thank you so much Mellissa, it's been great to chat with you and I appreciate it. And I'm really grateful and best wishes and please send me your doctor's information. I'd love to chat with him.

Mellissa:

Okay, I will do, thank you.

Michael:

I'll get him on a master class. All right, well, thank you so much. And this brings us to the end of today's episode, head on over to rebelhealthtribe.com/kit to access the RHT Quick Start Bundle, which includes four full length presentations from our RHT masterclasses, two downloadable PDF guides, and a 15% off coupon which you can use in our retail shop. If you're on Facebook, come join our Rebel Health Tribe group over there. And finally, if you like the show, please subscribe, leave a review and share with your friends. Thanks for joining us. I'll see you again soon.