Joseph Quirk - **00:00**

Foreign.

Dr. Joe Schneider - **00:05**

Welcome to my POTS podcast. I'm Dr. Joe Schneider, and after 35 years as a functional neurologist, a personal journey through stroke recovery and helping thousands of patients, I'm here to share breakthrough solutions for POTS neurological wellness. From getting out of bed in the morning to rebuilding your nervous system, this is your guide to understanding and overcoming neurological challenges. Let's begin this journey to recovery together. Okay. This is mindpods podcast. I'm Dr. Joseph Steiner, functional neurologist, functional medicine, functional neurological doc. And today we're going to be talking about something that's really talked about in the world of pots. Really, the people that we have calling us about POTS had a wide range of other autonomic issues.

Joseph Quirk - **00:57**

Yeah, it's very widespread.

Dr. Joe Schneider - **00:59**

Widespread, right, exactly. So we have postural orthostatic tachycardia syndrome, chronic fatigue. We have fibrogylia headache, pain, like migraine type headaches. They have digestive issues. They have issues with if they take a hot shower or temperature change, cold temperature change. They can have dizziness, attack, cardia also. So we're finding that it's really the better term for people that are calling with POTS is dysautonomia. So we ask people that they get screened by the cardiologist. That's the number one thing needs to be done. We need to know that the heart is, has no pathology in it. And so a lot of times people are on hydration, electrolytes, and they find that it helps, but it doesn't take care of all the dysregulation they have in their autonomic nervous system or it doesn't take care of all their dysautonomia.

Dr. Joe Schneider - **02:08**

So the autonomic nervous system is the most complex control mechanism of your brain and your body. Would you say that?

Joseph Quirk - **02:20**

So many components to it. I mean, just the breakdown of just trying to even get through the hypothalamus, pituitary axis alone, you know, with everything between all the different regions of your pituitary glands and all the hormones that they release in order to help with endocrine function, in order to help with sleep function, circadian rhythm. It really is just such a in depth topic and just kind of starting to break down that hypothalamus pituitary axis. We can just start right off with the hypothalamus.

Dr. Joe Schneider - **02:59**

Right. So we always talk about the peripheral effects of the sympathetic nervous system and the parasympathetic nervous system. Yes. So there's distinct wiring that we get from the brain to the body through the spine and from the vagus nerve itself that comes from the midbrain. So we have this interaction of sympathetic parasympathetic. And there's sometimes there's the fright flight and the rest digest. But there's some overlap interactions between that. And if you just concentrate on the brain and body wiring portion of it, you miss out on this beautiful effect that we get from the pituitary hypothalamus, which interacts with your body through your blood in your bloodstream. So we have a huge amount of wiring that goes into your peripheral circulation, your sweat glands, your capillaries.

Speaker 3 - **04:09**

Right.

Dr. Joe Schneider - **04:10**

And that's really important to make sure that is regulated properly. But you also have your thalamus. That's in your subcortex. Now, I had a stroke. I had a hemorrhagic stroke. My blood vessel popped on my left and took out my basal ganglion. So by default, I have Parkinson's because I had lost my power to my basal ganglion, which is what Parkinson's is, really. It's a degenerative disease of it. It's not extrapolated. But neurologically, I had Parkinson's. Another part of that subcortex that I had a lesion on is the hypothalamus or the thalamus.

Speaker 3 - **05:01**

So the thalamus is a sensory integration area where it puts the information into different parts of your cortex. Kind of fascinating, don't you think? And then from the thalamus, you have the pituitary gland and also the hypothalamus. And that's going to communicate with the body, not by wiring. It's going to communicate with the body by your bloodstream. And it's going to put in all these hormones into your system. That changes the function of things like your thyroid gland, your. Your adrenal gland, those two. And then you look at your thymus for immune system. You look at also your digestive tract, because there are certain chemicals that communicate with the brain when you're digesting food, like your stomach, right. Glucagon, insulin, from your pancreas, they all go into your bloodstream.

Speaker 3 - **06:07**

And we know that the hypothalamus pituitary is controlling all those things for your metabolism and thermoregulation and blood pressure. Thirst, mood, sleep, which is the part of the dysautonomia that we see most often, are all these types of functions that are not regulated properly. Now, a lot of kids that we see in the office will have overactive.

Joseph Quirk - **06:45**

Sympathetic nervous system, underactive, parasympathetic.

Speaker 3 - **06:48**

Yeah, but they'll have. One of the key features that a lot of the boys have is bedwetting. Young boys. Right. You think

young boys, but even 12, 13, 14, 15, 16 years old can have issues with bedwetting. Right. Which is a dis. Autonomic system. Your autonomic nervous system isn't functioning properly, and they don't realize it, but they're peeing their beds. They're peeing out their diaper onto the bed, onto the pad of the bed, then into the mattress. They're peeing so much that dysregulation means is that your whole central effect of your nervous system, whether it's the wiring to sympathetic and parasympathetic or it's the neuroendocrine aspect of it, is totally out of whack. All right, so it's dysfunctional. It's not operating right. It's totally out of whack. So then we're left with what. What do we do with the system?

Speaker 3 - **07:56**

Autonomic nervous system is out of whack.

Joseph Quirk - **07:58**

Try to return it to homeostasis.

Speaker 3 - **08:00**

Yeah.

Joseph Quirk - **08:01**

I mean, try and find that original balance.

Speaker 3 - **08:04**

So, you know, that's what we come up with in the office, is the different types of functional things that we can get so that we can correct a maladapted, a malwired and a mal. Neuroendocrine aspect of function. All right, so last time we talked about neuroinflammation. And so with neuroinflammation, we know that we get a destruction or a weakening of different areas of the brain, different wiring systems. And also if you think about the hypothalamus and the pituitary that we just talked about, they're responding to that inflammation. They want to kind of get rid of it, right? Yeah. They want to get your body to function beyond it. So nor inflammation can really start to cause your body to dysregulate. And that's what we're left with because.

Joseph Quirk - **09:02**

At what point is it too much? Inflammation can be great, but at what point is inflammation too much? You know, it's there to fight off infections, and we. We want to fight off infections, especially within the brain.

Speaker 3 - **09:15**

Well, that's totally correct. Right. So it has to be a homeostasis. You need inflammation for healing. Right. To initiate healing within the body. But you're right. When does it get too much? When it gets too much is when it affects your function. So if you look at the brain and what's the purpose of the brain is for us to respond to our Environment and our world. Okay. And so if it affects you mentally, where you can't process things cognitively the way you should. Right. Make the proper decisions, it can affect you emotionally and it can affect you in a lot of physical ways, like with temperature regulation, homeostasis, as far as your temperature is concerned, your blood pressure, food cravings, appetite. You know, people come in with dysautonomia and say, well, I just gained 40 pounds. Like, just like that.

Speaker 3 - **10:16**

And that's because that their hunger, the system of hunger has increased too.

Joseph Quirk - **10:22**

Well, what's so wild about that is that it can go both ways with that as well. You know, you may have somebody come in who's just kind of battling with anorexia now too. You know, they're not just gaining weight either. It's, it's that loss of weight potentially as well. And it really just kind of comes down to each individual and how their body handles that dysfunction.

Speaker 3 - **10:45**

Exactly. So, you know, we do have people that have come in with eating disorders and they have eating disorders through their teen years. I haven't worked with a lot of people that have eating disorders later on, but there are eating disorders actually with kids with autism where they have to be force fed to get them to eat. And so I think in modern neuroscience, we're going to look for ways that are non drug ways and non surgical ways to improve your nervous system, especially with your autonomic nervous system. I would say that's the most important thing to do. So it's kind of a new way of thinking and it's a new way of approaching it. And we like to think that we're in the forefront of solving those problems.

Joseph Quirk - **11:42**

I wouldn't say we like to think it, I like to think that we know it. You know, I mean, technology advances each and each every day, and we're right on top of it. New information comes out each day and right on top of it with that as well. So.

Speaker 3 - **11:58**

Yeah, yeah, I think so. The approach is the right approach. And with each patient, they're all different. It's never a classical problem.

Joseph Quirk - **12:09**

Never an easy problem.

Speaker 3 - **12:10**

No, exactly. And due to their medical interventions, due to the way they approach things, it can become very complex. And so when you take on a patient, especially a patient with POTS and with the overriding dysautonomia, then each person has a story to tell and we have to change the story from a tragedy to a hero mechanism. Right. So we want people to get their life back and they want people to be secure in their life. By making sure that their central nervous system, their peripheral nervous system, and their neuroendocrine system are all functioning the way they should. I'm wearing Make America Healthy again. I think that Kennedy is trying to take us in the right direction so that we don't have all these chronic diseases or there's less of chronic diseases. So we're hoping that John Kennedy puts us out of business.

Joseph Quirk - **13:12**

John, are you aging yourself?

Speaker 3 - **13:15**

Oh, yeah, I am aging myself. I'm thinking way back, that's when I was a kid. You know what I mean? Like, my father loved John Kennedy, so the Kennedys are still a big part of what's going on in this world. And, I mean, I hope he's confirmed and becomes the new Secretary of Health and Human Services. Right? Yeah.

Joseph Quirk - **13:38**

It's super important to just get back to the roots of healthy, organic food. Big movements with all of that.

Speaker 3 - **13:46**

Well, a lot of people are just more fixated with him on vaccines. I don't think he's anti vaxxer. What I think he wants to do is he wants more transparency and he wants to develop the vaccine so that there's less harm to our kids and our individuals having vaccine schedules that make more sense. Hopefully it gets confirmed and we get more scientific evidence about the good and the bad of everything that we're doing in our health system. Well said. Yeah, well said. So thank you for participating in my Potts podcast and we'll see you next time around.

Dr. Joe Schneider - **14:32**

Thank you for joining us on my POTS podcast. If you're looking for more support, Visit us at hopeprayingcenter.com or follow our journey on Tik Tok, where we share daily insights and inspiration. Remember, healing is possible. I'm living proof. I'm Dr. Joseph Schneider and I'll see you next time as we continue exploring paths to recovery.