

## **Eight Lessons I've Learned from Over Four Decades in Practice**

*By Dr. David Olson*

*What thousands of patients have taught me about aging well*

Now in my 47th year of chiropractic practice, I've spent more than four decades observing how patients age. I've cared for many people in their 90s and a few who reached 100. I've seen small habits become lifelong patterns. Stress leaves its mark on the nervous system, and strength — or the lack of it — shape independence more than most patients expect. The pattern is clear: the choices we make in midlife echo through the decades that follow. Here are eight lessons I've learned about aging well from more than four decades in practice.

### **Lesson 1: Health Is the Foundation**

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Patients who age well treat their health as the foundation of their life, not something they'll "get to later." Those who struggle most in their 60s, 70s, and 80s are often the ones who spent years dismissing early warning signs — the stiff back that "always loosens up," the shoulder that "only hurts sometimes," the difficulty climbing stairs, stress and poor sleep. Small aches and pains rarely stay small. Many patients who ignored them have told me they wish they had addressed them sooner.

Strength, mobility, sleep quality, metabolic health, and nervous system resilience are remarkably forgiving in our thirties and forties. Decline usually begins subtly: a little less energy, a little more stiffness, a little longer to recover. Over time, those small losses build into real limitations. What starts as "just a bit tight" or "just a bit sore" can become the reason someone stops hiking, playing tennis or golf, gardening, playing with their grandkids, or doing the things that once made them feel like themselves.

By contrast, patients who age with capacity pay attention to symptoms, stay active and mobile, and remain proactive about their health. They don't panic, but they don't dismiss things either.

### **Lesson 2: Strength Buys Independence**

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Strength plays a major role in the quality of a person's later life. I don't mean athletic strength, but the practical ability to move your body with confidence: getting up off the floor, carrying groceries, climbing stairs, reaching overhead, lifting a suitcase, or catching yourself during a stumble. These everyday movements often determine whether someone remains independent or becomes dependent.

I see this frequently in the clinic. Patients who once moved easily on and off the treatment table may begin to struggle just to push themselves up and place their feet on the floor. What used to be effortless becomes something that's difficult. Once avoidance begins, strength declines even faster, and their world, and their bodies starts to shrink.

Patients who maintain their strength age differently. They think better, walk with more stability, recover more quickly from setbacks, and stay involved in the activities that give their lives meaning. Their world stays larger because their bodies can still support the life they want to live.

Patients who lose strength often follow a different path. They begin avoiding activities that feel "a bit hard" because they're "getting older". But losing muscle affects more than the body; it changes confidence, balance, and the willingness to participate fully in life. I've seen patients become afraid of the very activities that once kept them young and strong.

Strength is far easier to maintain than to rebuild. Once muscle, balance, and power decline past a certain point, the climb back is steeper than most expect. It's not impossible, but it is harder, slower, and more frustrating.

The patients who do best in their 60s, 70s, and beyond are the ones who treat strength as a long-term investment. They don't train for appearance; they train for independence. They understand that muscle is not just tissue — it is freedom.

### **Lesson 3: Pain and Mood Are a Two-Way Street**

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People often think of pain as a purely mechanical problem — a joint, disc, muscle, or nerve — but chronic pain is also shaped by the sensitivity of the nervous system. When pain lingers, it doesn't just affect the body; it rewires your nervous system and brain. Pain is actually experienced in your brain, not your body. Chronic pain can contribute to depression and anxiety, and depression and anxiety can intensify chronic pain. The two often feed each other in a loop that is more common than most patients realize.

This cycle often begins with something small: a nagging ache, a tight spot, or an injury that never fully settles. As these issues persist, the nervous system becomes more reactive. Movements that once felt comfortable begin to feel guarded. Sleep becomes lighter, energy drops, and patients move less — not because they're lazy, but because their body feels unpredictable. Less movement then leads to more stiffness, more sensitivity, and more pain.

Then the emotional weight builds. Pain wears patients down. It changes how they think, sleep, cope and their relationships with others. I've seen patients become discouraged and eventually depressed — not because they're weak or lazy, but because living with persistent pain is exhausting. Depression and anxiety can increase pain sensitivity, lower resilience, disrupt sleep, increase inflammation, and amplify the nervous system's alarm signals. Over time, the cycle tightens.

The patients who break this cycle are not usually the ones who find a single magic treatment. They are the ones who understand that chronic pain is a whole-system issue, and that small, consistent changes can calm the nervous system over time. Better sleep, gentle movement, strength training, social connection, and nutritious food are not extras. They are the levers that help reset a system stuck in alarm mode.

### **Lesson 4: Connection and Purpose Protect Your Health**

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Patients often think aging is purely biological — muscles, joints, metabolism, and old injuries — but connection and purpose protect health as powerfully as strength and mobility. The patients who age well rarely isolate themselves. They stay engaged, curious, and connected to something larger than themselves.

I've seen patients with average genetics and imperfect habits thrive because they had strong relationships, meaningful routines, and a sense of belonging. Their nervous systems stayed calmer, their stress loads remained lower, and they recovered more quickly from setbacks because they weren't carrying their emotional weight alone. Purpose gave them direction; connection gave them resilience.

The opposite is also true. When patients withdraw — often because of pain, fatigue, low mood, their health can decline faster. Isolation can amplify pain, increase nervous system sensitivity, disrupt sleep, and erode motivation. As their world shrinks, their bodies often follow.

The nervous system is profoundly social. It regulates differently when we feel connected, supported, and valued. A good conversation can ease pain, a shared laugh can reduce tension, music can soothe the soul and a sense of purpose can help pull someone out of a downward spiral.

When you get together with other people of your age bracket, don't get involved in a conversation about getting old and your aches and pains. If you tell yourself you're getting old, your brain will eventually believe you.

Patients who age with vitality keep showing up — for their friends, families, communities, hobbies, and themselves. They don't wait to “feel better” before reconnecting. They reconnect because it helps them feel better.

## Lesson 5: Back Pain is Both Simple and Complex

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After treating patients with back pain for nearly 50 years, I can tell you that most patients misunderstand what their pain means. They often blame a weak core, tight hips or shoulders, a disc, a joint “out of place,” a pulled muscle, or some dramatic structural problem. In most cases, the truth is simpler — and far more hopeful.

Back pain usually comes down to one of three things:

- Your body can't currently handle the loads you're placing on it. This does not mean you are weak or fragile. It simply means the demand has exceeded your current capacity.
- Your nervous system has become sensitized. When small problems linger, the nervous system can become more reactive and protective and send pain signals even when nothing dangerous is happening.
- A combination of both. This is the most common pattern: a bit of overload paired with a bit of sensitivity.

Many patients think they must have “done something” to cause a flare-up. In a sensitized system, that is often not the case. The event — tying a shoe, reaching for a towel, getting out of a chair or getting up in the morning — is rarely the true cause. It is simply a time when the overloaded or sensitized system finally speaks up.

Poor sleep, poor diet, chronic stress, and lack of exercise can all make the nervous system more reactive and reduce tissue tolerance. Over time, this creates a loop: pain leads to less movement, less movement leads to more sensitivity, and more protection and sensitivity leads to more pain.

The good news is that this cycle can change. When you improve capacity, calm the nervous system, and address small problems early, your body can become strong, predictable, and resilient again.

## Lesson 6: There Is Always More Capacity in You Than You Think

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Patients are often far more capable of change than they believe. I've seen patients who thought they were “too old,” “too stiff,” “too weak,” or “too far gone” make remarkable progress. Many rediscover strength, mobility, confidence, and joy. The human body — and the human spirit — are astonishingly adaptable.

The biggest barrier is rarely age or injury. More often, it is belief and mindset. It's worth repeating — if you keep telling yourself you're getting old, your brain and body will eventually believe you.

Patients often assume that once pain appears or strength declines, “this is just how it is now.” But that is not what I've seen. I've seen 70-year-olds become stronger than they were at 40. I've seen chronic pain settle after years of frustration. I've seen patients regain balance, rebuild muscle, restore sleep, and reclaim parts of life they thought were gone.

Muscles can get stronger at any age. Strength can be rebuilt almost anywhere — in a living room, on a walk, in your back yard, with bodyweight, light weights, or resistance bands. The location matters far less than consistency.

The body is always listening, always adapting, and always capable of change.

The nervous system, even when sensitized or overwhelmed, can learn safety again. It can settle, rewire, and heal — not instantly, but steadily with the right inputs.

What gives me hope, even after decades as a chiropractor, is how often patients surprise themselves. They start small, stay consistent, and rebuild capacity one step at a time. Then one day, they realize they are doing things they once avoided or feared.

## Lesson 7: Change Takes Time

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Real change takes time. You might feel better quickly after some treatment or exercise, but that's usually just short-term changes in your nervous system. Muscles and nerves don't remodel or re-wire overnight; they adapt slowly through repeated input. Strength, coordination, balance, and pain sensitivity improve over weeks and months, not days.

When patients don't feel quick improvement, some become discouraged. The early stages of rebuilding capacity often feel harder than expected. Sometimes the first few weeks bring more discomfort — not because you're causing harm, but because you're waking up tissues and pathways that have been underused or overprotected.

It's easy to give up during this phase and think, “This isn't working.”

But early friction is normal. It is part of the process: the nervous system recalibrates, learns new patterns, and gradually lets go of old protective habits.

The patients who do best are not the ones who feel great right away; they are the ones who stay consistent long enough for the body to improve and adapt.

## Lesson 8: Master the Fundamentals Before You Take on Too Much

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I often see patients engaging in high-intensity workouts, extreme sports, heavy gym routines, or excessive core training despite lacking basic functional movement capacity. I regularly assess patients who do advanced activities and exercises but cannot complete a full deep squat, a controlled toe touch, look over their shoulder, or a pain-free overhead reach. If you can't perform these basic movements well, then your exercise classes and sports like tennis, golf, pickleball, yoga, Pilates, running and hiking can become extreme sports for your body.

This mismatch matters. When foundational mobility and motor control are limited, the body compensates. Those compensations may not cause immediate pain, but over time they increase mechanical stress, reduce movement efficiency, and contribute to recurrent injury and pain.

High-load or high-volume training layered on top of poor movement patterns does not build resilience — it builds strain.

And here's the part many people underestimate: if you're doing extreme sports, high-intensity exercise classes, or unsupervised do-it-yourself YouTube workouts, be prepared for injury. When someone rips up an ankle, blows out a knee, throws out their back or tears up a shoulder, those injuries don't just affect the present — they add to cumulative incapacity later in life. Every major injury reduces reserve, alters movement patterns, and increases the workload on the rest of the body. Your body keeps score. You hurt it too much now and it will get you back later in life.

The patients who do best long-term are not the ones doing the hardest workouts. They are the ones who can move through fundamental patterns with control, symmetry, and adequate range. A deep squat, a clean hip hinge, a stable overhead reach, and the ability to transition from the floor without strain are far better predictors of healthy aging than any advanced gym exercise.

## In Conclusion

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After 46 years of caring for patients, I've learned that aging is not something that simply happens to us — it is something we participate in every day. The patterns I've seen are consistent, but they are not fixed. Patients can change. Bodies can adapt. Lives can improve. Even small choices can shift the course of our later years. These eight lessons come from decades of watching many of my patients grow older with resilience, struggle, courage, and surprise. My hope is that they help you see your own path with more clarity — and more possibility.