



HEALTHY WEIGHT IN HEALTHCARE

— with Katrina Ubell, MD —

Katrina Ubell:

Hey there! Thanks for joining me today. Thanks for coming back to the podcast and joining me today to talk about how busy we all are. I can't wait to talk about this, but I do want to just quickly point out something I have noticed so many people going on: spring break vacations and going to all these warm weather places and doing all these great trips and how they're talking about what they're going to do with their eating while they're there. So I just wanted to touch on that really quick. By the time this airs, probably most people are going to be done with spring break, but some of you might be still taking some trips and this is going to apply for any trip that you're going to be taking in the future.

Think about the last time you went on vacation and think about the results that you had. What was your mindset going into it? What I hear so often from my clients is that they're like, "Well, I'm going to do it and I'll see how well I can do. Hope I can make it work," going into it basically already defeated. What does hope get you? Hope gets you nothing. Let's talk about some actual plans to make sure that you get the results that you want. As you know, I'm going to roll back to decisions ahead of time, so what is your plan? Now, I'll tell you, my plan on every vacation even when I don't think I need to lose weight is to try to lose weight on vacation.

I go into vacation with a mindset of "I'm going to try to lose weight on this vacation." One way that I help myself do that is I have this little travel scale that I got on Amazon. It's not expensive at all. It's really little and light, and so I bring that on vacation. I always weigh myself while I'm on vacation. It really helps me to just keep things in check. It's so easy to think that little things aren't going to matter like those justifications that we talked about on the last podcast. All these little justifications, all of a sudden, creep in and so when you're heading on the scale every day, you're just getting some good feedback as to how it's working for you.

So, again, the scale is not judging you. It does not have a personality. It's your thoughts that are judging you if you have trouble standing on the scale. So the scale is just giving you some feedback, some data points, and so I find that to be super-duper helpful. When you are going into your vacation planning to lose weight, it totally changes your mindset as to what you're doing, like what you're eating. Are you going to have this treat or are you not? Are you going to have

that drink; are you not? Are you going to go out to breakfast or are you going to keep it really simple? When you're going into it wanting to lose weight on vacation, you're totally looking it like, "Okay, this is my plan. This is my typical plan at home. I'm going to try to stick to that as much as I can," and not even maybe say you're going to try to. How about just commit? "I will stay on my plan."

Now, this is the thing though. Oftentimes we do want to have a little something special. We want to have a little exception or joy eat and that's completely fine. Say you want to have a margarita, that's totally fine, but rather than going like, "Well, I'm sure I'm going to have some margaritas," which is completely open-ended and not defined at all, you can decide, "Well, okay, how many margaritas do I think I want to have?" You could go, "Okay, well, we're going to be there five days. I think I'd like to have two nice big, really good margaritas." Okay, great, then you get to decide, do you want to have both on one day? Do you want to have one when you get there and one on the last day? You can decide wherever you want to plug those margaritas in, but then you're not cheating. You're not going behind your own back. You're saying, "Yeah, I plan on having these and I'm going to have them today."

Now, if you decide that you don't want one while you're there, then you don't have to. It's just giving yourself that option because you're planning for it. Same thing with desserts like ice cream or things like that; like you might want to have ice cream twice. That happened to me last summer. I took my oldest son on a mission trip to Dominican Republic and it was in July so it was going to be crazy hot, so I knew that I was probably going to want to have ice cream a couple of times just to escape that heat, because where we stayed, there really wasn't air conditioning.

So I did. I knew it was a week-long trip and that twice, I will let myself have some ice cream. Honestly, that was totally fine. It really was perfect. I think the opportunity arose about twice and that way I wasn't thinking like, "Oh, should I or shouldn't I?" I'm just like, "You know, I'm so hot I just want something to cool me off." I enjoyed it. It was no big deal. The scale was not affected and my results were not affected.

So when you go into a vacation trying to maintain, especially if you've never been successful at maintaining before in your life, what you're doing is you're opening yourself up to tons of chatter and negotiations and way too many decisions in the moment and it's just not defined enough. That's how we ended up going off the rails. We go all or nothing. All of a sudden we're indulging and having all these different things and then we're like, "Screw it. I'll get back on track when I get home from vacation," except a lot of the times we don't and then we gain a bunch back, and then we're right back at square one again. So that's what I want to offer to you going into every vacation: planning to lose weight, looking for the opportunities to stay on your plan and thinking deliberately about what you might want to have.

When I went to Italy, for sure I was going to have gelato, for sure I was going to have pasta, but I made a plan as to how often I was going to have that, and when I wasn't having those things, what I was going to eat instead. It's totally doable.

So today, like I mentioned before, we're going to be talking about being busy and all the thoughts we have about being busy. What's so funny about that word is that I think everyone identifies with being busy. Like who isn't busy? Do you know anyone? I mean especially doctors. Our days are always busy and if they're not busy, then they're crazy busy.

I mean occasionally, there's the slow day, but in my experience, those are really super few and far between. When I was in practice, people would ask me how my practice was doing. I always said we were busy, and it always felt true. If it wasn't all the summer check-ups, it was influenza and RSV season. It was always gradations of being busy. We really never had days with big gaps. I mean it was pretty often that I was so grateful when someone no-showed because it meant that I could shorten my wait time to be seen so instead of being 25 minutes behind, I was only like 5 or 10 minutes behind.

This level of frantic action felt pretty punishing a lot of the time. I very much felt at the effect of my day. Like my day was the cause, like everyone around me, the patients, the people, the schedule, and I was at the effect of that. I always hated it when I would walk into the clinic first thing after rounding at the hospital in the morning and one of the nurses or medical assistants would immediately say, "I hope you have your roller skates on today," meaning we're really booked up, you're going to be running all day. I would let that put me into such a bad mood. Has that happened to you, too?

Another one was when I was walking into the office and one of the girls would tell me that our first available appointment was already at 5 p.m. and in our practice, we basically would continue seeing patients after hours, at least for a while, before sending them off to urgent care. So, there it was, only 9 a.m. and I was already believing that my day was going to be crap and I was going to get home late. So, guess what happens when you believe your day is going to be crap? I'll give you a clue. Your day is crap.

I think I was able to work through those thoughts sometimes by telling myself that all I had to do was keep going. Eventually the day would end and that would help, but my overall experience of that day was never very pleasant. I wasn't as patient. I was so worried about not getting too far behind that I felt really rushed in each patient room, but that kind of rush where you feel rushed but you don't want the patient to feel rushed, so you do everything you can to be as efficient as possible in the room which means that you're distracted throughout the whole appointment. You know what I mean? I took on basically a general demeanor of not having time for anything extraneous but in the martyr way, like the "woe is me" way.

But what's so interesting is that when I was first building my practice, I was worried if I had too much time sitting around. We set up our beliefs so that we can't ever be happy. If I had no patients on my service, then I'm not making enough money. Where is my referral base? Why is there a drop-off in people coming to me? If we do have patients, then we complain that we're too busy. So our beliefs set us up to never be happy.

I was recently coaching one of my clients and she often described her days as being busy or crazy busy or super busy. I could see how much stress and anxiety that was creating for her. She'd go on the computer at night and look at the census, like on a Sunday night before starting on Monday to see how many patients were on her service. She'd let that spin her out into dread and self-pity and overwhelm. As we know about feelings, there's always a thought preceding them, and not only does the thought precede the feeling, the thought creates the feeling.

So for this client, her thought of "It's crazy busy" created those feelings of dread, self-pity and overwhelm. So it's important to recognize that it's not the number of patients admitted that creates those emotions. It's our thinking about the patients that creates those emotions. If we follow those feelings through to the action that they drive, we can see that dread, self-pity and overwhelm drive the actions of overeating, over-drinking and staying up too late watching Netflix or bumming around on social media. The result is that the day stays the same, meaning it's still the same number of patients that need to be seen. Our thinking about the day is the same so our experience of the day is still not very pleasant, and in addition we're extra tired because of staying up too late and overeating and drinking, which made that little sleep we did get less rejuvenating. At the end of that day, we describe it as crazy busy and feel sorry for ourselves so we've completely manifested that thought of "it's crazy busy."

So you can see that. That day will be crazy busy, that thought creates exactly what we don't want as a result, because what we generally want is a fulfilling day where we helped a bunch of people and we felt as well-rested and energetic as possible, and we didn't get caught up in gossip and interpersonal drama and we didn't overeat and we don't feel like the only way to survive the rest of the evening is by downing a few glasses of wine. So I asked her, "Who decides which census number means your day is busy?" Like, "How many patients need to be on your service to make the day crazy busy?" Like, "What has to happen in order to define your day that way?" Like, "How many patients is busy? How many patients is crazy busy?"

She thought about that for a while and said, "Well, me. I get to decide if my day is busy or not." Then she started putting the pieces together, seeing that by looking at her day that way, she was making her life so much harder and creating results that she didn't want. So I asked her this, "If you couldn't use the word 'busy' to describe your day, how would you describe it?" She thought for a little

while and she said, "I would say I got to help a lot of people today," and that's also true. It feels so much better. It's also interesting to look further into why she was even looking at the hospital census on a Sunday night. The purpose was certainly not to spin her out into dread and overwhelm. She didn't just go, "You know what, I think I'd like to dread my day tomorrow and feel totally overwhelmed."

But a lot of people struggle with that before they go back to work. Some people call it "the Sunday Scaries," but I think that doctors that work shifts can have the same thing, but not only just on Sundays. You might be looking at working a whole string of shifts day after day for a while, and the night before you check the census to see what's going on and start dreading what's up ahead. How many patients are laboring? How full are the wards? How many consults do I have to do? How many add-on cases are there already? I asked my client why she was logging on in the first place and it was simply to know how many patients were waiting so that she could figure out when she needed to get up Monday morning so she could get all the work done, which is totally fine.

If we don't make what we see mean all kinds of doom and gloom and create all these unnecessary negative emotion for ourselves. The number of patients on the census is a circumstance, a completely neutral fact. We get to decide what we want to make it mean. So then she asked me a really excellent question. She wanted to know if her brain would always spin out like that and then she'd have to go through the process of self-coaching to reel herself back in every time. That's such a good question, because the answer is that, at first, yes. That old brain programming is so well-established, the brain will go right into "Sunday Scary" mode, like within a split second.

But because you're aware of your thoughts, you notice the thoughts that don't serve you immediately and you could remind yourself that this is just a thought error. It's just your brain thinking the old way and now you have a new way of thinking that's better. So what is that new way of thinking? It'll probably be different for everyone. It can be as simple as reminding yourself that you don't have to go into drama mode. You can just do the mental math to figure out when you need to get up so that you can get the rounding done before clinic and go set your alarm and then intentionally think about something else.

Go read a book or watch a show or get a few more chores done around the house to prepare for the week. When your brain tries to go back and cry wolf about how horrible the day is going to be, you can ask yourself, "What if the day wasn't crazy busy? Is it possible that I could see all these people, do an excellent job, and still think the day was fine?" Let your brain ponder that for a little while. Is it a possibility? There's probably, at least, some sort of chance that it could happen. So then you could ask yourself how you could create a day where you saw all the patients, did an excellent job, and thought the day went fine.

If you have that kind of a day, how would you need to feel to create that experience for yourself and how would you have to think about the day to create that feeling? Then you can practice thinking those new thoughts intentionally throughout your day and see what feeling they genuinely produce for you and see if that feeling creates the actions and results that you want. It might take some practice to find the right thoughts and feelings and that's okay. It doesn't mean you're doing it wrong. It just might take a few tries to hit the sweet spot, meaning how exactly you want to think so that you can feel how you want to and need to feel so that you do the things you need to do to get the results you want.

I know for me, in addition to staying focused and getting done all the things I needed to do, I would consciously refrain from gossiping. I'd stay away from distractions like social media, and I would deliberately decide to not get into in-depth personal conversations with anyone that took up a lot of time. Those would really help me to get the results I wanted. Another option for my client would be to coach herself before she even logs on to the hospital computer system. She could anticipate that her brain is going to try to freak out and go into panic mode so she could intentionally remind herself that whatever the number is on the census, it'll all get done and it's all good. She could tell herself that she's just looking to decide when she needs to get to bed and get up so that she's already in the right frame of mind when she gets on there and doesn't have to spend a lot of time turning the busy thoughts around, basically doing damage control.

The interesting thing about busyness is that the way we use it, it's so ill-defined. It's completely subjective, like what defines a busy day? At what point does it transition from just busy to crazy busy or insanely busy? I think what seems to determine how busy the day is or was is our stress level. If we're super stressed or emotionally exhausted, then it was insanely busy. If the stress level is just pretty much our average, then maybe it's just a regular busy day. I was thinking about where these belief system and mindset comes from, especially in doctors. I think it starts in third year of med school. That's when we really hit the wards, start working intensively with the residents and fellows and attendings, and we learn a whole new culture, the culture of the medical world.

There are all these unwritten rules in this culture. You have to hate call. You have to show up on time and work hard but at the same time you can complain about the work that you have to do and how late you end up staying. You can blame other doctors and all the ancillary staff at the hospital when something doesn't get done or it does get done but not to our liking. There's a general negativity that permeates everything. Then we become residents and the negative thinking amps up. Before we know it, we've gone from being elated because we're one of the very few selected from a huge pool who actually get to be doctors to being jaded and frustrated and judgmental.

But we never consciously decide to start thinking this way. It's modeled to us by the residents ahead of us and we adapt that belief system generally without

even questioning it. We just take it on and then pass it down to the med students and residents that were below us. It's like this inheritance we passed down. Now, I'm not saying that all of you are throwing adult tantrums all day long and saying really unkind things about other people right and left. But I know that I was throwing adult tantrums in my head with my thinking pretty often. I was thinking unkind things about some of my patients or the people I work with pretty regularly. On the outside I'm sure I looked much more put together and patient than I was on the inside. What I didn't know at the time was how all of that was optional, and not only optional but chosen by me. Every time I had those thoughts, I was reinforcing that neural pathway in my brain.

Thinking that way was so habitual and automatic that it didn't seem like a choice. It was just my reality and felt like my truth. I've been thinking so much about this busyness topic for a while now and last night my husband who's ear, nose and throat came home a little later than usual and I asked him how his day was and he said, "Oh, busy." So I smiled and said, "Okay, but if you couldn't use the word busy to describe your day, what would you say?" He thought about it for a minute and he said, "I took care of a lot of really smelly people today and I feel like I smell like them right now because I was so close to them for so long." I totally cracked up.

I told him that was a much more descriptive way to let me know how his day was, but I joked with him a little bit. I said, "When do you ever even have a day that isn't busy?" He said, "Well, sometimes I have gaps." I said, "You haven't had gaps in years." He was like, "Oh, yeah, I guess you're right." His practice is doing great so he is quite full, which is a good thing in terms of supporting a family and helping a lot of people. I think it's just so interesting to think about why busy has to be bad. The definition of busy is engaged in action or full of activity and that's very neutral. It could be good. Being engaged in action and full of activity is pretty good when you get paid for the work that you do.

The other area where we spend so much time in busy mode is our personal lives, especially if you have any children at home. I mean what mom doesn't think her life is busy and then what working mom doesn't think her life is busy? Again, who defines that? I know moms whose kids are in a million activities and they are always running and they think it's great. I know moms whose kids have one activity on Saturdays and they feel totally overwhelmed and too busy. In this case, how we define busy has a lot to do with the comparison of our actual lives with some ideal life that we've concocted in our heads.

We might think the ideal life means that we're well-rested all the time, always patient with our kids, have a great social life, and a job we adore. When we compare that to our real lives, we see none of that. We blame it all on being too busy. But every single thing we decide to do or not do is a choice. Literally there is not one thing you have to do in life. You don't have to work or take care of your kids or even pay taxes. You can not do any of those things and live in jail or a homeless shelter for the rest of your life. That is an option that's available to

you, but for the vast majority of us, that's not an acceptable solution. We want to go to work so that we can make money and live in our home comfortably. We want to care for our children and follow the law.

So we can just decide to stop thinking about going to work or driving the kids around or paying taxes as some sort of punishment. It's all a choice that we made. We can look at our lives and be so grateful that we have the money to pay for the travel baseball team because a lot of people don't. We can be grateful that not only are we paid decently for our work, we also get to help save people's lives on the regular. If we're not saving their lives, we're working very hard to make their lives better and healthier.

I always would bring myself back to that point. I would remind myself that I could have taken a job in investment banking and never directly impacted other people's lives for the better through my work, like pretty much ever. You may have a different thought that works better for you and you can choose to remind yourself of that.

So the best news that I can offer you here is that busy is optional. It's really an indulgent emotion. It doesn't feel very good and it doesn't result in anything good. It makes us want to overeat and drink and do all that to feel better or to reward ourselves. That gives us the result of being overweight. So I want to challenge you, if you couldn't describe your day as busy, how would you describe it? It might not always be that great. You might have had to break some bad news. You might have had to deal with an emergency. You might have had to deal with some staff issues. But stop using the "busy" word as though it's a badge of honor. Be honest with yourself about how you're spending your time and choose a different word to describe your life.

Head over to the show notes page for this episode which you can find at KatrinaUbellMD.com/14, and tell me in the comments how you would describe your day if you couldn't use the word "busy." I can't wait to hear what you come up with, so let me know on there for sure. Have a fantastic week and I will talk to you soon. Take care. Bye-bye.