

[00:00:00] Well, hello there, my friend. Welcome to the podcast. So glad to have you here today. I have a really fun episode for you. I want to introduce you to one of my weight loss for doctors only clients. Her name is Kendra Sweet. She is a physician in Florida and she is someone who has just really incredible story and is also just a really normal person. I think that when we are doing this work, it's really easy for us to think that we can only have success if we hire a personal chef or we hire a personal trainer, or we have someone who runs our whole life for us. I

know I used to have those thoughts like, sure, I could do all of that if that's all I had to focus on. There's no possible way that I can do it when I have all these other obligations in my life between family and my job and everything else. And Kendra is such a great example of the fact that that's completely untrue, just totally a lie that we tell [00:01:00] ourselves and believe. And then we allow that to keep us from creating what we really want.

[00:01:05] And so she is here to discuss not only her incredible weight loss story, but also the kind of side benefits that have happened for her physically and even in terms of her work and her personal life. And really just everything has changed for the better for her in doing this work and really working on her eating and, you know, just her emotions and relationships and all that work that we do in weight loss for doctors only.

So I can't wait to share my interview with her. She's a great person that I know you're really going to enjoy listening to and hearing her story. So please enjoy my conversation with Kendra Sweet. Welcome to the Weight Loss for Busy Physicians podcast. I'm your host, master Certified life and weight loss coach Katrina, MD. And this is the podcast

where busy [00:02:00] doctors like you come to learn how to lose weight for the last time by harnessing the power of your mind. If you're looking to overcome your stress, eating and exhaustion and move into freedom around food, you're in the right place. Kendra, thank you so much for being on the podcast.

[00:02:23] Thank you so much for having me. I'm really excited to be here.

[00:02:26] I am really, really excited to talk to you today because you have a super, super great story. So interesting. We're going to get to some of the, I think, more interesting things a little bit later. But let's just first start off by talking a little bit about like at what point in your life you first started struggling kind of with like food, eating weight? When did that all start for you?

[00:02:46] Honestly, I was overweight as a child, not obese, not significantly overweight, but always bigger than. Probably your average child. And I remember [00:03:00] probably the first time I tried to lose weight was when I was in sixth grade doing some kind of fad diet with some of my friends, which of course worked for a week and then gained it right back. Ever since elementary school, I remember being heavier than I should have been, and it's continued since then. I've always been very active. I was a swimmer all through high school and half of college and has been a triathlete, and I've done a lot of hiking, but weight has remained a challenge regardless.

[00:03:29] Okay, cool. So it's like, you know, you kind of kept it under control to a certain extent with the exercise. Did you find that at a certain point that wasn't working anymore?

[00:03:38] When I got pregnant with my first child, I gained a tremendous amount of weight. I also had torn my meniscus right at the same time that I got pregnant. So my exercise decreased significantly at the same time that I was gaining a lot of weight with pregnancy. And then it took a long time to get weight off from that pregnancy and then got pregnant [00:04:00] again a few years later and gained a bunch of weight back then. So it's always been this kind of up and down cycle throughout. I mean, really my entire adult life. I do remember back in my early 20s there was one period of time where I felt, I guess, confident about my weight for maybe a couple of months and then just gained everything right back again.

[00:04:20] Did you try like a lot of different diet plans and stuff over the years or where were you at with that?

[00:04:26] Mostly Weight Watchers, You know, as you've said many times, it works when you do it. If you stick to it, it works, but it gets boring after a while. It's hard to to incorporate that into your day to day life if you're trying to do anything outside of the norm, the norm, being preparing all of your food at home and and bringing it to work. And so it makes going to restaurants tougher and going to someone else's house harder and any kind of event. So eventually I just kind of. Stop doing it. And I'm not someone who enjoys cooking. So there was a period of time kind [00:05:00] of funny, and this was not forced, but a period of time where my was doing Weight Watchers with me and we had a deal because she wanted to cook healthy meals, but she wanted some motivation to do it. So I would buy all the food and then she would cook for both of us and just bring a bunch of food at the beginning of the week. That is.

[00:05:17] Brilliant.

[00:05:18] But then she moved away and it all fell apart. And all because I wasn't going to cook anymore. Right. So I just stopped doing Weight Watchers.

[00:05:28] Right, right, right. So when you did you first start listening to this podcast? I'm assuming you did because most people do. Yeah.

[00:05:35] Okay.

[00:05:36] Where were you at when you first started listening to the podcast? Like, what was the impetus for you to start listening?

[00:05:41] So actually I had just started Weight Watchers again, and I had a friend of mine who came to visit who I'd seen a year prior, and at that time, well, when she came to visit, she lost about 65 pounds. And I asked her how she had lost all this weight. And [00:06:00] she mentioned your podcast. And ironically, she's not a physician. She's a teacher, actually. But she started telling me, you know, I just stopped eating sugar and flour and snacks. Well, that doesn't sound that bad.

I had always thought of myself as someone who had quite a sweet tooth, so that part sounded like it'd be the hardest part to give up. But she told me about your podcast and I started listening to it and I was like binge listening to it. Once I started listening and I was talking to her all the time about everything that I was learning and kind of shifted away from Weight Watchers and just shifted to no sugar and no snacks really, before I even gave up flour altogether just went away from sugar and snacks and really started to get in tune with, Am I actually hungry? No. Why am I trying to eat this? Or why am I wanting to eat and just starting to get in tune with reasons why I was actually eating, which most of the time we're not physical hunger.

[00:06:54] Mean like so many of us, right? Yes, totally. So then at what point were you thinking, okay, I think I want some additional help, like in the form of the weight loss for doctor's only program.

[00:07:04] I started to realize that there were a lot of reasons that I had been eating. There were a lot of reasons that I was eating when I wasn't hungry and that it was I could give up eating, but I was still kind of uncomfortable, just kind of not buffering with food or with sugar.

[00:07:22] I think that's the hardest thing, right? It's like not really that different than Weight Watchers anymore. You know, you're still, like, uncomfortable. You still don't feel good. You're still, you know, struggling.

[00:07:31] Exactly. Exactly. Like I could give it up, but I didn't I didn't know for sure. Could I continue this long term if I don't address kind of the underlying reasons that I'm doing this in the first place? So that was really when I when I looked up the program and looked up what Waldo has to offer, it just kind of spoke to me, to be honest with you. Like it just seemed to offer a lot of what I needed at that time. Had a lot of feelings of not being completely settled in my work life and [00:08:00] just wanted a little bit more understanding of what was going on in my mind, my own mind, and how that correlated with my eating habits and my weight. And so I thought if I could really dig a little deeper into all of that, it would really help me in my overall well-being, not just my weight, right?

[00:08:17] So let's just pause. We'll hit pause on the weight loss thing for here for a second. So how old are you when you first started having migraine headaches? Seven,

seven years old. Okay. And so give us a quick progression of what that looked like as you started the program.

[00:08:33] Yeah, I mean, I thought back then and I probably am missing a lot of details from back then, but I think the initial thought was it was related to my jaw. And so I had braces in the second grade to try to do things with John. But the headaches were were kind of persistent and certainly not as bad as they were in adulthood, but definitely had headaches frequently in high school and in college and and then really probably in my early 20s is when I started getting them much, much, much more frequently. And so [00:09:00] averaging probably six days a week from my early 20s until, you know, last fall, which you know, was 44.

So for about 20 years, averaging about six things a week, getting a migraine headache. And then I started seeing a headache specialist, a neurologist who specializes in headaches two and a half years ago and was started on dairy medication to try to prevent them, which sort of worked. But the doses just kept getting increased and increased and increased and then was taking a trip down and was, you know, because there's a limit to how many triptans you can take in a month, you know, was told basically pick the days you want to have a headache and pick the days you don't and take the trip in on the days you don't want to have a headache.

[00:09:41] So that was kind of how I was functioning and taking Tylenol and ibuprofen a few times a day. And once I started on this program and, you know, made these changes to my diet and. Really think started better understanding the whole connection between my mind and my body and how to manage my [00:10:00] emotions. And all of this started coming together. My migraines started getting so much better. I mean, so much better. That's been the biggest change in my whole life. I still get them. I mean, I do still get them, but I went five months between refills of my triptan and that only has nine pills in the box. So I went from taking 13 in a month to nine over five months. My daily kind of preventive medication dose was cut in half. I get a headache maybe 1 to 2 days a week. Now that's usually manageable with Tylenol. And it's just been life changing. Absolutely. Life changing.

[00:10:36] Mean it's like an absolute miracle. And I just want to say what you've been able to accomplish, having so many migraine headaches. I mean, guess you get to a

point where you're just like, this is just my life and you have a headaches way more often than you don't. But still, it's like just incredible. And then the fact like, I'm guessing you kind of were at a point where you're like, I guess this is just my life. It's probably just not ever going to get better. And then to be able to have this really unexpected side benefit [00:11:00] of doing this other work on yourself, I mean, it's just incredible.

[00:11:03] Yeah. Like you said, it just was kind of like, well, this is what it is like. Some people, I guess, just have headaches and I'm one of those people. And so you just either get on with it or you do nothing. So doing nothing is not really an option, so get on with it. But then it took me a little while to start to recognize like this thing is really consistently getting better. I guess. Maybe to me, well, maybe that's not totally true, but I guess it took me a while to realize what to attribute it to.

But the timing, when I realized when I had last refilled my triptan and then when I stopped needing it so frequently and it all started coming together. But this is fascinating. And then on Halloween last year, I did have some sugar and the next day had a horrible migraine, a horrible migraine. And I realized, wow, that is very likely the cause. And, you know, a couple times over [00:12:00] the holidays, when I did have sugar, the next day, I had terrible headaches. And so it's just if there's nothing else at this point that I really need to motivate me to stay away from it.

[00:12:10] And that's not even what, you know, I typically am like, you know, recommending or telling anybody to do. Usually it's more like, Hey, let's figure out a way where we can coexist with sugar, where if you want it to be a part of life, you can have it as part of your life in a more rational way where you feel in control and you're an example of someone who's like, No thanks, I'd rather not.

[00:12:29] Exactly. Which I never would have expected because I always identified as such a sweet tooth. And I mean, I would go as far as to say I mean, I was addicted to sugar right At the end of a busy clinic day, my nurse would go down to the gift shop in the hospital and just buy tons of crap, and we'd just sit there and just eat like chocolate covered pretzels and gummy lifesavers and just all this candy. It was so gross when I think about it. But we would do that all the time when [00:13:00] we'd have a stressful day in clinic. And now just the thought of that is just repulsive to me, which is great. But I mean, at the time that was like how we managed our stress.

[00:13:08] I was going to say, you didn't know any other way. That was the only way you knew to get through the day and you probably felt like you were doing something fun and nice for yourselves. And it was a way of kind of bonding with people getting that social connection. Yeah, it makes sense. But then when you realize you're like, maybe there's some other ways that I could accomplish the same thing without eating all of that stuff.

And that's really what we work on, right? Like, I think so many people think it's like, okay, here's your diet. Like, here's what you're going to eat and mean. Don't tell you what to eat at all. But like there's, you know, some guidance. It's mostly just helping you to figure out what's going to work best for you. But, you know, you get started on that and then we get into everything else like, so how do you get through, you know, a difficult clinic day and not just be like, well, in too bad, you just have to suffer and feel awful now because you don't get to have anything nice, you know?

[00:13:57] I mean, I think it's really recognizing or just being [00:14:00] more aware of, hey, what's making me feel uncomfortable, right? It's the things that would make me want to eat sugar, you know? What were those things? Is it a negative patient interaction? Is it that I, you know, personalize that too much and made that about me, when in reality it's not really about me? Or is it, you know, I'm an oncologist, So there's for better or for worse, a lot of end of life discussions. And is it that, you know, just had a, you know, an end of life discussion with a young patient that was emotionally challenging and that was hard to kind of come down from or whatever it may be.

But now it's kind of reevaluating and rethinking about those scenarios and say, you know, an end of life discussion, for example, I can kind of stop and recognize that, you know, this person was going to be in this scenario, whether I'm here or not, But my role for them is to make the. End of their life as good as it can possibly be. You know, to make them realize that they have done every single thing they can possibly do to [00:15:00] try to improve this situation. And this is where we are now. And now my role is to make them as comfortable as they can possibly be so they can die with dignity. And so rather than cheering like I have somehow failed them, I can choose to think about it. In a different way in that I have helped them as best as I can and I feel like I

have been in in this place to try to make their lives better because their scenario wasn't going to change whether I was here or not.

[00:15:32] Right. Like your role kind of switches a little bit, right? You're like, I'm here to help them, you know, no matter what. And so, like, when we've exhausted all our options over here, then we transition to, okay, so now my role has shifted into helping them in the end of their life be as comfortable as possible.

[00:15:48] Exactly. But those sorts of thoughts are available to me rather than just feeling like I have nothing and I've failed them. Yeah. Which is, I think what leads to this kind of. Well, obviously sadness [00:16:00] and kind of need to act in ways that don't serve me, don't serve my body. But if I can think about things in a different way, in a more. And worth a positive way to think about something maybe more useful.

[00:16:14] I like to think of it as a more useful way, right? It doesn't have to be more positive, but it's more useful. It's like what came to me is like the image is like it can feel very empty, right? To feel like. Like you have nothing you can give anymore, you know, like you're just like, you know, or sometimes people even feel kind of numb, like they don't even know what to think. And so we just will eat because we're like, we want some sensory input or we want to fill up that emptiness. And but we don't have conscious awareness that that's what we're doing. We're like, I don't know, I just wanted gummy lifesavers or whatever you're saying.

[00:16:44] You know? Exactly. It's true. It is true. It's just filling a void. But rather than filling it with candy, you can just fill it with what I really think is the truth, which is that I have been in a place to provide [00:17:00] as much help and guidance as anyone can, and that makes me feel a lot better about the goal that I put in.

[00:17:09] Yeah, it's like you suffering more is definitely not going to help that patient in any way at all, you know what I mean? Or you kind of like, you know, punishing yourself to a certain extent, right? Or, you know, thinking negatively about yourself or there's nothing good comes from it. It really is the realization, I think. Right.

[00:17:25] Exactly. It just doesn't it doesn't help anybody. It doesn't help me with the patient either. And, you know, it just there's nothing good that comes from that.

[00:17:33] Well, and I think that that can really lead to a lot of burnout, too, you know, taking on all that responsibility. And then, you know, this is an art of medicine on purpose, right? Like, not everything works all the time. In fact, a lot of times it doesn't work. And you know, that resistance to that or thinking that, you know, somehow if you were just smarter or better, like you could, you know, save this person or whatever, like, I don't know why we think that way, but it's not helpful. It's certainly not helpful at all, no. [00:18:00] So would you be willing to share how much weight you've lost in our program?

[00:18:04] Well, that's 56 pounds.

[00:18:06] That is awesome. And that's your goal weight, right? You're at goal and you've been there for a little while now. Yes. Which is so fun. Congratulations for that. Gained and lost.

[00:18:14] 5 pounds here and there, which I think is Normal. Most people do not sit at the exact same weight like all day, every day. Right, Right, right. Yeah. So now you're working on maintaining, right? Like which is not something you ever did before. So how is that going?

[00:18:30] It's going really well. It's a learning process because I've never been in this place in my whole life where I've not wanted to lose weight. So I feel like I've always been in a cycle of either losing weight or gaining weight. So now I'm just at this place of wanting to keep my weight where it is and figuring out the best way to do that. So it's definitely a learning process I definitely have made. I don't even want to use the word mistakes because they're just I just am realizing, you know what? Just figuring.

[00:18:57] It out. Really? Yeah.

[00:18:59] Yeah. I [00:19:00] have noticed that if I do start snacking on something, my weight tends to go up and it also is usually snacking on something when I'm not hungry. And so I don't need to be doing that anyways and need to be addressing whatever it is that's making me snack on something. And so I think that just finding the right approach. I did cut out flour for a while when I was getting closer to my goal weight, and I think

incorporating that back in is really, for me, the best way to to maintain my weight without adding back sugar or snacks, but just having a little bit of flour here and there to add in a little more variety and just kind of keep my weight at where I want it to be.

[00:19:41] Yeah, I think if you're able to eat a little bit of flour, then it makes it easier when you're like eating out or things like that, you know, like I'm not even much of a pasta person, but like every now and then, you know, it's just like, it's just nice. That's like, yeah, you know, sometimes I have this, you know what I mean? Like, not that big of a deal. Yeah. That's awesome. That's [00:20:00] so. So what happens in weight loss for doctors only, which I think a lot of people are surprised about, is we end up coaching on all kinds of other things. And just like you were talking about like, you know, talking about like, how do you deal with those clinic days?

And there's so much work that can be done there and it makes not eating all that stuff so much easier, right? I think a lot of times we're like, well, I'm going to be pulling that away from myself, like pulling away the candy at the end of the day and things like that. So I guess I just have to be miserable. Like, no, what we do is we actually stop, you know, make it so you just don't even need that or even desire it anymore, which makes it really easy to not have that. But we also often end up really delving into other things that are going on in various people's lives.

And I mean, honestly, like the whole gamut from A to Z and everything in between. And so I know you've been done well, you've done a lot of work and you've been coached a lot on your job and a potential opportunity to leave academic medicine, to go into a firm, a job where you could do more research like this, very related to the work that you've been doing for [00:21:00] many years, but then also like a family issue that was influencing that as well. I know this is an issue that just a lot of people are considering or thinking about. And so I'd love. For you to just share a little bit more whatever you feel comfortable sharing about that process?

[00:21:15] Absolutely. I think that this program, quite honestly, has been so impactful in helping me make this decision and feel good about the decision that I'm making. So I have been in my current job for ten years. I as you mentioned, I'm in an academic oncology and I treat leukemia. And I've been here at the same cancer center for ten years. And more recently I've just started, I'd say in the last few years, started to feel

unsettled maybe, but really couldn't put my finger on what it is, because when I have talked to my department chair and asked for various things and he gives me what I ask for, I've gotten promotions to I'm [00:22:00] doing things that I love to do.

And so it's been hard for me to kind of drill down on what it is that makes me feel unsettled when if I just intellectually talk about what I'm doing, it's exactly what I want to be doing. But, you know, through some of the work in this program, I've really also spent a lot of time focusing on values, my own values, my core values, and really kind of makes me who I am and what kind of drives me to keep going. And so I think if I really drill down to like, what are my two primary core values, I would say family and personal well-being, which, you know, personal well-being could certainly be.

[00:22:39] That's a vague term potentially, but nevertheless, family is a big one. And then kind of touching on the family scenario, I have my husband and my two kids that live here in Florida with me and then my parents and my sister live in California and my sister has special needs. She has PKU that was not diagnosed at [00:23:00] birth and when diagnosed when she was two. And so she has cognitive deficits related to that being diagnosed late. And so my parents are very involved in her life and in kind of day to day, sort of the day to day stuff with with her.

And I have been more removed from that than I would like to be. And on some level, I have always known that I'm more removed than I want to be from what's going on in California with my parents and with my sister. But I don't know that I've ever really been able to articulate that. And just once I was able to really figure out kind of where my values lie, what's really important to me and family is really important to me and recognizing I want to be more present for my sister moving forward. I want to be more involved in her life in the years to come. I want to be more involved in my parents lives in the years to come.

[00:23:58] And I'm not moving to California. [00:24:00] They're not moving to Florida for a variety of reasons that we don't need to get into. But nevertheless, that's not happening. And so something else needs to change. If I wanted to really be in alignment with what I value and my current job for all that it has to offer doesn't offer the flexibility to be here and in California at the same time. And so ultimately, I just came to the realization that if I really want to live in alignment with my values, I need to find a different job that allows me to do that, that provides me the flexibility to be here and be there when I need to be there, when I want to be there so that I can be present for my family out there and my family here.

And that really matters to me. And so I found a job that is in the pharmaceutical industry, like you mentioned, doing clinical development, designing clinical trials, running clinical trials in my area of expertise, that is [00:25:00] a remote job so I can work from home companies based in California. I can kind of be where I need to be and still be working and provides me a degree of flexibility that I just don't have in my current job. And so after much coaching about it.

[00:25:16] I would call it careful consideration.

[00:25:19] Careful consideration.

[00:25:20] A rash decision by any stretch, you Know, not a rash decision by any stretch of the imagination. I finally came to the conclusion that that's what I wanted to do, and so I resigned about two months ago. I'm still in my my job at the cancer center. I'll be here for another two months. And then I'm starting my new job in July. I feel good about it. Overall mean?

[00:25:41] Well, it's it's very normal to have a lot of thoughts and feelings.

[00:25:46] Making A big decision like that that really changes. And it's a really it's a big life transition for you. And I just want to speak to, you know, something else that we talked a lot about, which was just the shift in identity, right? Like you thought you would be a certain kind of doctor doing [00:26:00] certain kinds of things and then realizing, you know, what's really better for me is doing something different, but that doesn't align with that identity. Or what you envision for yourself. So it's like realigning that, creating a new identity. It's an adjustment. It really is.

[00:26:16] That I think has been and I haven't even left yet, but that's probably been the biggest adjustment for me so far, is the fact that I really identify with being a doctor and with being an academic leukemia specialist. And I don't think I realized how much my identity is ingrained in this job until I decided to leave it. And all of a sudden, I'm

recognizing that it's harder to walk away from than I thought it would be. Not just I mean, the people here are amazing and that's hard to walk away from, but really, because I'm kind of like, Well, who am I if I'm not this person? And so I have to kind of recreate that in my own mind and who I want to be. I remember asking you to like, Does this mean I'm a fake doctor now? Right, Right. [00:27:00]

[00:27:01] We're going to take away your degree.

[00:27:04] Right? But you're like, well, I don't know. I mean, the job you're taking now, a job for a doctor. I mean, and then not. Right. I come to terms with that Now. I know I'm not a fake doctor, but still kind of recreating that identity and feeling like, okay, now I get to really think about who is it that I want to be, who am I going to be, what are the reasons I'm doing this and how am I going to kind of re-identify myself? But that's been a big shift and that is not been nearly as simple as I just tried to make it sound right.

[00:27:34] But that's like one of those those side benefits, like, you know, you wouldn't have had all this coaching support and help in making that decision. And kind of like I mean, even now getting, you know, help with sort of like the aftermath, so to speak, of that decision. Had you not decided, hey, you know what, I think I want to get some coaching help on my food and eating and, you know, weight, right? Like, oh, my.

[00:27:52] Gosh, no, I would still be in my job just feeling very unsettled, trying to figure out why. Yeah, that's exactly [00:28:00] where I would be and probably would gain all the weight that I had potentially lost from Weight Watchers is exactly where I'd be because I've done all this before. Exactly that. I mean, the coaching support that I've gotten has really been it's been crucial. And, you know, when I signed up for Master's, I mean, I asked my husband if he was okay with it, but it was kind of like just asking but telling him.

[00:28:20] Like, I'm doing I'm doing this like.

[00:28:23] Right, I'm going to do this because I cannot leave my job and move into this whole new thing and not have this degree of support because I have to have this. I need it like it's been so valuable and I've coached on this so many times and every single time it comes up, I mean, I feel like a broken record, but I also learn something new and

have something new to work on every single time. So realizing just there's still there's so much more there.

[00:28:48] When I just want to commend you because I think it's easy for people to shame themselves, like, Oh, I've already been coached on this, you know, several times. Like, I don't want to bother them, bring it up again. And you know, all of us as coaches, we're like, No, bring it [00:29:00] up. Like, you know, you're this is how you make progress. This is how you get to that place of decision, not by like shaming yourself into, you know, thinking that you shouldn't be getting the help that you really need. And I think that that's just really that was such a fun part of this process, right?

Like now you're you're maintaining your weight and you're learning how to do that. And that's like that's definitely going on kind of, you know, to the side. I don't think it's like the main, main focus anymore. And these other things get to get there kind of like the light of day, too, you know, the light shone upon them so that they can be worked out and you can kind of do them simultaneously, which is so fun and so great.

[00:29:37] It's really. Yeah, I can't think of actually, I can't think of the last time I coached on food or weight, which was the week that I reached my goal weight. And I asked a question about maintenance, and I don't think I've coached on it since then, and that was in January and now we're in May. I mean, yeah, like you said, it is. It's just kind of like a thing that's happening. And that's how we want.

[00:29:58] It to be, honestly, right? We want maintenance [00:30:00] to be something that's like, Oh yeah, every now and then think about that. But for the most part, I just this is how I do, you know, this is how I roll. Like this is just life and it's not so much focus on food and weight, which is really what we're all wanting. Whether we lose weight or not, we want to stop thinking about it, you know what I mean? We want to be free of that so that we can just be around it, have a, you know, healthy relationship with it, whatever that looks like for each one of us individually. And this is what that looks like, which is just so fun and so fewer headaches. Oh, my gosh.

[00:30:32] It's amazing. It's amazing. I now I'm like, I call myself a headache wimp, because when I do get a headache, I'm like, oh, gosh, I really just don't want to work with this headache right now. Like, how did I do this all the time before? Because it's like

I've been exposed to the good life, right? Still 1 to 2 days a week. I'll do it, but so much better. I don't like it. Amazing.

[00:30:52] Right, right, right, right. Okay. So in closing here, as we wrap up, first of all, just thank you so much for sharing your story and, you know, all the [00:31:00] things that you shared, because I know it's going to be, you know, so helpful to so many people. But I wanted to just ask you one more question. So, you know, undoubtedly there's someone listening to this episode who's like, I wonder if I should Is weight loss for doctors right for me? Should I join them or not? I mean, there's good stuff on this podcast. Can I do it myself? I don't really know. And I would just love to know what you would tell that person.

[00:31:21] I would tell that person that anyone can can do it any mean. I've struggled with my weight for 45 years. I'm 45 years old, so I'm going to say 45 years. Well, 44, because I had struggled since I turned 45. And all of a sudden, you know, since finding this program, it's not a struggle anymore. And so anyone is capable of that that is available to anybody who wants it, which I think is absolutely incredible. And it's such a gift. So take advantage of that gift that been given. It's right there being handed to anyone who wants it.

So that's what I would say. And then [00:32:00] along with that is just the ability to learn so much more about yourself and what matters to you and how to manage kind of everything else that's going on in your world and how to make your whole life a little bit easier to to look at and just feel supported and feel cared about. And it's all right there ready for you. So I would recommend it to anybody personally just because of. The benefits I have experienced. I have recommended it to many people. I've got a couple friends that are in Waldo now that joined and and think again. They just they're experiencing significant benefits as well. And and I, I would love to think that everybody could feel as good as I feel.

[00:32:47] My gosh. So good. That is so great. Yeah. Because think that. Right. We we think like other people can do it but that we can't. And like you are a normal person with a real life and real challenges [00:33:00] and all the right. Like just it's like sometimes we're like if I had this perfect life and I wasn't actually human, then I could do it. No, like,

you can do this while also actually being, you know, a regular person with a job and family and all the things.

[00:33:15] Yeah, absolutely. I'm just as regular as anyone else. The husband, who is great but also irritates me at times and kids who are awesome but also crazy and you know, they have schoolwork and activities and have a job that I'm here too many hours, you know, we've all got the same thing. We're all in the same boat, really, when all is said and done.

[00:33:36] And there's a way to make it work. Yeah. So good. Well, Kendra, listen, thank you so much for coming on and sharing your story and telling us all that. I appreciate you so much, so proud of what you've accomplished. It's just incredible. Always a pleasure to coach with you. So thank you so much.

[00:33:52] Thank you. Thank you for everything that you do for me and for everybody else. I'm just so grateful for you. So thank you and thank you for having me on. This is really [00:34:00] fun. I feel honored.

[00:34:01] Awesome. Thanks, Kendra. Ready to start making progress on your weight loss goals. For lots of free help, go to <u>katrinaubellmd.com</u> and click on Free Resources.