

[00:00:08] Welcome to the Weight Loss for Busy Physicians podcast. I'm your host, master Certified life and weight loss coach, Katrina Ubell, M.D. This is the podcast where busy 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. Well, hello there, my friend. Welcome to today's podcast. I couldn't be happier to bring you another weight loss success story. Geri Aitken is just such a lovely, lovely human being and physician as well, and she's just made incredible progress using coaching as the main modality for really just improving [00:01:00] every aspect of her life.

So I wanted to bring her on to share her story because I think, first of all, it's really inspirational. She is also super down to earth and I think really relatable. I think everybody who listens to this is going to get something out of it. She's really just. Really dug in, like really opened herself up to the possibilities that await when you're willing to look at the way you think and feel. And so anyway, she's going to tell you all about herself and her background and all those fun things when we get started here. But I just wanted to let you know that this is another great interview, absolutely worth your time to listen. And please enjoy my conversation with Geri Aitken.

[00:01:43] Geri, welcome to the podcast. I'm so glad to have you here today. Thank you for having me. This is such a treat. It really, really is right. We've had so much fun. We've like taken half of our time just just chatting beforehand, but now we're going to get into it. So introduce yourself, if you will, please, to [00:02:00] our audience. What would you like to share about yourself? My name is Geri Aitken. I am a family practice trained physician doing adult medicine now in upstate New York, and I've been in

practice for 23 years. And interestingly, when I first started listening to your podcast or my husband started listening to your podcast, the commonalities were overlapping because I too am an engineer undergrad.

I studied mechanical engineering first, decided that wasn't my life draw and then found medicine. So happy to be living here as an empty nester in upstate New York. Awesome. Very good. Yeah. There's not too many of us who have that engineering background heading right into medicine. There are some. There are some. All right, very good. So let's start at the very beginning. At what point in your life did you first start struggling with your weight? You know, I had awareness about weight my whole childhood with observing other humans in my life that, you know, talked about weight a lot and struggled with weight a lot. So [00:03:00] I felt like diets and weight gain were kind of a conversational.

[00:03:06] Continuum through my whole childhood, not directly affecting me, but kind of penetrating into a lot of the thinking. It wasn't until probably the end of college that I started to really identify that I might have a propensity to gain weight or maybe do some a little bit of emotional eating, but pretty much carried a normal body weight through then. So I got married like a year after graduating undergrad at quite a young age, which is funny because back in those days that was probably like very normal. Right now it seems like even when I look at when I got married, I'm like, That was a baby. What was I doing?

I know it's so interesting looking back for sure. I was on the front end of my peer group, but but yeah, people were right behind me on that. And in that first year of marriage, I mean, I look back at it as maybe joy eating. I mean, we just like we're just living it up. And I [00:04:00] had, I don't know, 20 probably pounds of weight gain. And we we kind of immediately identified it. We went on one of those very structured weight loss programs where they send you the food. And we both achieved some pretty immediate weight loss that was completely unsustainable when you went up on the program. So yeah, that was my first foray into like a structured diet for myself was right after that. So you tried that, you lost weight, you couldn't keep it up.

[00:04:28] And then what happened? Well, then it was interesting. So, you know, looking back at that time, you know, kind of maybe 20 pounds or less above a mid

range BMI, you know, I thought it was a lot. But that perspective changed because over the next years, decades, child rearing, going to medical school. I went to medical school after I got married, doing my residency. I had a child in medical school and I had a child in residency. And then I had a child right as I finished residency, starting off being an attending in family medicine. [00:05:00] It was a pretty steady weight gain throughout all of that. Okay. I hit some some good highs with each pregnancy.

And then, you know, I would do a little bit of kind of unintentional work after each of those pregnancies. And it was just very cumulative. So then I've heard so many people kind of give their weight history. And the fascinating thing that when I really reflected on mine was that. I really didn't have a lot of emotional connection to my weight, like it wasn't something that spoke to me every day. I think I suppressed it. It wasn't like each day I was like, Oh, I'm so unhappy with myself. Or I just had kind of decided I was a jolly, fat human and I was living my best life. And I don't think in retrospect that was a full truth.

[00:05:48] But I think that was the story that I told myself at the time. And it wasn't until 2012 or somewhere in there that I had a medical awareness that I was [00:06:00] really diabetic Type two, and it really was a shake up. And I think that was, I would honestly say, my second big lifetime diet, you know, 30 years later or something like that. It was fascinating because I put myself on what we knew at the time a low carb, calorie restricted diet. And I will powered through some amazing steps and I lost a lot of weight. And again, it was a lot of willpower. I hadn't done any of the work on my mind. I didn't have awareness that I was an emotional eater.

I really had no awareness of that. And it wasn't until I found, you know. So I would say that it was for like eight years later, I gained some of it, not all of it. I just my husband stumbled on your podcast and brought it to my attention. And he's not a doctor, right? No, no. But he pretended to be to learn that info. He's like he when he first found it, he thought it was weight loss for busy professionals. Like he kind [00:07:00] of overread that part. And it was so fascinating. So he listened to like your first 2 or 3, and then he was like, he'd been on his own diet roller coaster and he wouldn't mind me sharing that.

[00:07:12] And it was fascinating because he was immediately connected to it, like he was immediately connected to the science and and all the things that you offered from

the data perspective. And then the thought model, I think it was like three weeks after he started, we were in a car and he's like, So I got something I'd really like to share with you. I think he was afraid of being judged and he was kind of cautious how he shared it with me. And yeah, from then on it was just kind of full on listening to the podcast, making some changes, identifying emotional eating.

And one day I came home. He had signed up through one of your programs to learn more about your program fully knowing that he couldn't enroll in it. But I really think he wanted me to enroll. So I came home from work one night and he's like, So there's a live in you [00:08:00] can learn about, like. And I was like, Dude, it has been the longest day. Like you telling me I need to lose weight. It's kind of what my brain offered me, but in the end, that's not what it was he was implying. It was just like, Can we learn? Can we grow in in all this knowledge? And I signed up that night and it was probably five months later that maybe four months that my official program started. And it was a journey of a lifetime, but a journey of two years.

[00:08:28] And that has changed everything. So something kind of spoke to you. Were you realizing I mean, also as a family doctor, I know you know, it's not just your own journey with this. Like you're just seeing people trying different things and struggling with different things. And I think that that, you know, to a certain extent, informs our thinking around it, too, right? It's not like we're just like, Oh, something's wrong with me because when I try to eat this way and use willpower, it doesn't work. It's like we see all these other people trying to do the exact same thing and it not working for them the majority of the time.

So I mean, that is actually kind of a luxury like [00:09:00] coming to that kind of quicker, making it less about yourself and what's wrong with you and more of like maybe this way of doing it just isn't that effective. But so I'm curious about the point where you kind of realized like, was it listening to the podcast or just because your husband brought it to your attention where you're like, maybe there is something more to this than, you know, just what I'm eating? Oh, absolutely. I mean, I think, you know, in your early podcasts, you kind of spoke to like the newer science stuff that had come out of the obesity code and the awareness that calorie a calorie was not a calorie was not a calorie, and fat was not our nemesis.

[00:09:36] And all these kind of scientific principles that were completely not in alignment with what we had been trained with in medical school or what the marketers had shared with us, you know, in the 70s, 80s and 90s. And so I think it was that awareness that really kind of caught my eye. I'm like, Yeah, I know we can all lose weight with willpower, but why are people not sustaining it? What's really happening [00:10:00] and why are we not honest with ourselves? Like, it sounds judgmental and I don't mean for that to be the least bit judgmental, but I had this amazing awareness all of a sudden that it was all within me. Like it wasn't external to me.

And I think so much of what the humans that struggle with this, my patients myself was you start to create beliefs that somehow this is external to you, like you can't possibly lose. Way, because these 12 factors. Let me give you all the reasons. Oh, once I started getting coaching, I mean, it was not about the food. It was about the awareness of emotional eating and and all the stories I had told myself that I was allowed to give up. And were you like, did you have an experience with coaching or anything like that? Like kind of those, you know, working with someone to explore what's going on with you? No, because I think sometimes people are a little like never afraid to find out what's going to what they're going to find out, you know? Oh, it's such amazing [00:11:00] stuff.

[00:11:00] And it's so not voodoo, you know, like, you know, it just just the word sometimes makes people kind of pull back a little bit. But, you know, my favorite way to describe it to people now is, you know, it's all based on the cognitive behavioral model. So it's it's proven, it's scientific. And and to me, what excellence of your coaches bring and you bring is just the questions all coaching does is open up the opportunity for you to have awareness about your thinking, your emotions, your actions and your outcomes and. It's not somebody telling you what those things should be. And I think that's when I recognize that power.

You know, that's when I decided that inherently I had been doing some coaching just unwittingly on a much lower level. And that's why I went on to learn about coaching myself. Yeah, Yeah. So I would love to know just kind of broad strokes or as much as you want to share some of the things that have changed for you. Well, I've, I've [00:12:00] lost 43 pounds and I'm 8 pounds from my goal. That is incredible. And probably the lowest of the lowest. Right. In terms of importance, right? Yeah. Yeah, exactly. I mean, I look back now and I thought, I mean, I remember the first day you

coached me and you very genuinely kindly, like, recognized that I was in a rush and that, you know, that was my highest priority.

[00:12:27] Hello. Had signed up for a weight loss program in coaching. And you very sweetly said to me, Now what is your hurry? And I was like, What? Like, what is that question mean? And and it was my highest priority. And I was like everything in my life, I am an achiever and a perfectionist, and why wouldn't I throw everything into achieving this goal immediately? And then, you know, throughout the last two years, everything else has gotten great. And so it made me realize that all my relationships [00:13:00] have improved because I've been able to get rid of all these manuals I had developed and been handed in childhood about what good relationships were both expected from the other party and expected for what I was to bring.

You know, I just cannot believe how my relationships with all the humans in my life have improved the relationship with myself. I really did not view myself as a person who was not kind to herself and was like, Oh, I was fat and happy. Like, you know, of course I was kind to myself. Now my inner dialog, which was really tucked in deep, was always just being a little critical. It was just micro criticisms all the time, and I've really developed a way to get away from that and unconditionally love myself on my best days and on my not best days.

[00:13:45] It's totally changed my work, not just in my ability to do my job with a presence that is not frustrated all the time. Basically, I look back and I realize that I constantly. As [00:14:00] a pleaser needed validation from other humans. So I was that special snowflake doctor that you'd want to come to so that those. Give me emotionally higher needs. Patients would say, Wow, you take the extra time, you do the wonderful things. And in creating that, I was always behind. I always didn't do dictation or charting in a way that was really loving to myself.

I thought that I it was not about me. I had to give to everybody else. And then the balance of work and child rearing and all of that has changed. I'll never forget the day I listened to your podcast where you interviewed your husband on the topic. It was just so life changing. I for two years now, I'm completely caught up on my charting every day in a reasonable amount of time because it's I believed it was all external to me. And you never told me in your team, never told me how to fix it. They just allowed me to realize

where my thinking was getting in the way. [00:15:00] And so I am a human that goes to work and does a great job and is not as focused on pleasing everybody and and gets my work done.

[00:15:09] Yeah. From a satisfaction and fulfillment standpoint. In terms of your work, do you feel like that's improved? It's going to sound odd to say this, but yes and no. So I'm going to say to you that I am totally satisfied with the fact that I can be present. I can do great work. I'm not connected to people's outcomes as emotionally as I was in terms of me feeling like I'd pleased them. That has changed in such beautiful, beautiful ways, brilliant and so amazing because everything you described about attracting those patients, I'm like, Yep, that was me. Oh yeah. And you know, I've lost some of the needier patients in being able to explain to people and being able to be present in their, you know, in deciding what's their belief system and what's my belief system that has really, really helped. [00:16:00]

The reason I say yes and no is going to sound different is that I've now started doing more administrative work and I manage my practice. I'm learning that I'm good at it and that it's going very well. I've done a lot of good transformation in our practice, but it's probably not my favorite life skill, so I'm just kind of rethinking that right now. Like, you know how I want to continue to do good clinical medicine, but maybe more of my own time frames as I get closer to retirement. I had one of the greatest experiences with one of your coaches.

[00:16:29] One day I'd like to share, and that was for 20 years. I carried the belief that when the patients were disappointed in something that it was my fault, my problem, and that I should try to fix it. And the biggest complaint I've gotten in the last five years is patients saying to me, I don't have enough access to you. And I would be like, oh, let me just let me just hold on to that problem and carry it around and give you lots of access to me. Oh, yeah, Let's figure out how to how do we give you access to me? Right. Everything I tried [00:17:00] increased my hours, modify my hours, offer telemedicine, limit certain types of appointments, increase certain types of points, every single thing I tried. Either made my work life alignment much worse or it just didn't. It wasn't successful. Patients still weren't like, Oh yes.

So anyway, one day I brought this problem, this problem. It was like it was a fact to coaching. And the coach said, So why is that a problem? And I'm like, Oh, I'm sorry. Clearly didn't explain it well enough to you. My patients don't have enough access to me. Right? And she's like, again, Why is that a problem? And we worked together in that 15 minute coaching session in this incredible outcome. And she basically was like, just because somebody else believes that's a problem doesn't mean you have to adopt.

[00:17:45] That's a problem. Is there a solution without you working crazy? And I'm like, Well, there isn't. She's like, So what if you just say to people, I'm really sorry that you are feeling that way? I totally respect your choices about what type of care you need [00:18:00] in your future, and it's been an honor caring for you. And if I'm not your right fit, that's okay. Can I tell you how freeing that has been? Nobody leaves, but it does change the expectations where you're letting them know. I hear you. And I won't be changing anything like you. You can stop asking for more access because it is not available.

It's not an option that's on the table. And then they can decide, okay, am I okay with this or am I not? And a lot of times they are okay with it. Totally freeing and retraining expectations by me setting what what serves me is really been kind of life altering. I used to believe that self care and focusing on my self was selfish and selfish was a bad word, but it was in retrospect. My awareness is that it was just it was just an excuse to not spend the time. Loving myself and developing myself in all the ways I wanted to. And [00:19:00] that has been so amazing to be able to give myself permission to be selfish or love the word selfish or redefine the word selfish in my own beliefs.

[00:19:10] Yeah, I mean, think that like just with burnout among physicians being such an issue, right? It's like it's exhausting. When you think that you have to be serving, you know, emotionally and physically exhausting and unsustainable to be approaching it the way you were describing. Right? Like they're complaining, I have to fix it. And the only way. Well, first of all, from what you described, there isn't a way to fix it, because even if you provide more access, they still complain that there's not enough. They're like, can you just move into my house? That's the kind of access that I would like. Like that would be enough. You know, it's like it's never enough. And by you providing more access, you are lowering the quality of your life, right?

So it's like everybody's losing here. And by thinking about it in a different way, everyone's winning, right? They're either getting the opportunity [00:20:00] to find someone else who can provide the level of service or attention or, you know, access that they desire or not, and then they get great care from you when you are available to them and you get to enjoy your work, which I just think it's important to mention that because, you know, we have to figure out a way to make being a doctor be sustainable for people, you know, like we have to find a way for people to be able to, you know, feel at least reasonably good enough to be able to continue doing this.

[00:20:30] We cannot have, you know, the majority of the doctors like retiring early or leaving to go to, you know, like industry or whatever, which I totally respect that decision for, you know, for people who want to do that. But there's nobody left to take care of us, Right? So so I think it's like giving, you know, if you if you work on all of that like you have and still decide, you know what, I actually just prefer to do something else amazing, like totally go and do that, but not like I have to stop doing this because it's so I'm so miserable doing it. It's such an awful [00:21:00] experience, like taking back that power to determine, you know, what you're okay with And people.

It's like letting people be wrong about you, be mad at you about stuff, be totally disgruntled. It is hard is very hard. And particularly for women, I think particularly for women, it is the biggest awareness is that across all of these areas that have improved in my life is that, guess what? I am not responsible for anybody else's happiness, only my own. That's just so transformative to to really own that, not in a negative way, but in an empowering way. And because I could have thrown everything that I had emotionally diagnostically at a human that was not prepared to be happy or content or it was just not going to be enough for them just being so where they were at.

[00:21:52] And this coaching has allowed me to have empathy for them, but not ownership. You know, I can give all the right tools. It's [00:22:00] also what's led me to get coach certification because in my own company there's two huge needs, one of them being mentoring weight loss in a different way. So, you know, not just with the way medical doctors or Dos can do weight loss, but also in physician burnout. I realize that these are two areas that I've learned so much about that perhaps I can share with other physicians to be able to say there are options in the way you look at this.

And the day that we're recording this, you just came out with your last podcast on the topic and it's it just speaks the truth. And that is that we this thinking is victimizing. And that's an option. Like, I don't have to be victimized by this line of thinking I can choose a new line of thinking that's empowering. Totally, totally. It's available to people if they're open to it. It is. You know, also, we totally, like, totally respect, you know, the idea that some people [00:23:00] aren't going to be open to it, like totally fine. I mean, some people will say to me like, Oh, I just wish I knew all this stuff earlier in my life. And when I always say is like, you know, I'm not convinced that maybe it didn't cross my path at some point and I just wasn't ready to see it or hear it or it just wasn't the right time for me.

[00:23:17] My brain wasn't ready. It wasn't the right time in my life, you know. So I just always look at it as like, you know what? Like maybe someday, you know, they'll be open to it. And also, if they don't want to, that's okay. But those of us who are open to it like we have options and that is very empowering. To your point, you know, there's a lot that we can we can do. And it doesn't negate that there are some real problems in the whole, you know, medical industry as a whole.

There are some real, real problems. It's not saying that those don't exist, that it's like just blaming the physicians. It's not that it's owning the part that you contribute, which can really, really improve your experience for the better. And I always look at it as like, I mean. [00:24:00] You became a doctor for a reason, right? I mean, there was something. So if we could just, like, reconnect to that. Like, why did we even do that in the first place? You know, like, if we could reconnect to that, that can also help us to keep ourselves moving in the in the right direction or, you know, at least creating while we're figuring out what we want to do, creating a better experience of it.

[00:24:23] It's reconnected me to my empathy for myself, but also to my empathy for my patients. What I realized in looking back during all those years where I felt like my my alignment, my balance was not in a good state was it was just it was kind of an excuse to be kind of frustrated at the end of the day, you know, eating a bag of chips on the way home or whatever food behavior I identified. Well, you know, it was out of me believing that, you know, I deserved it. It had been a hard day. And this human had said this to me and this human had said that to me.

And in the end, my action of showing up [00:25:00] and doing good medicine and my result to myself and the patient was always the same. But it was the thought and the emotion that was just coming from such a it was a negative thought and a negative emotion. And now I can go to work and I can create something different in my thinking. Of course, this human is frustrated. Of course, this person is saying these words, It's not me. It's okay. They're sad, they're scared, and I can. But that doesn't mean I have to sit in the room and hold the hand for an extra two hours. It means that I can recognize it. I can hold space for an appropriate amount of time for it.

[00:25:37] I can give them options for treatment, and then I can accept that they're not ready to take it. If they're not ready to take it and not own it and think that's a huge part, right? It's not like your opinion of yourself, you know, as a person or as a doctor is hinged to them, you know, trusting you or deciding to follow your recommendations or your treatment plan. Like [00:26:00] there's a clear distinction there, right? Like you've offered the information which you feel great about, and then now it's in their court and they get to make that decision rather than like, my way is right, your way is wrong.

And when you hear the criticisms of medical professionals, like just from the general public, it often is that like feeling very judged, you know, making the decision that you think is right for you and then feeling like, you know, they're telling you all the reasons why you're not doing the smart thing or whatever. And there can be we can make an argument for sometimes when we are like maybe didn't quite educate you properly on, you know, like, like let me help you to understand a little more, but not just assuming that we always know what's right. I always think of it as like, you know, even like, well, I mean, it's just you just, you know, graduate enough. Years ago, recommendations change. So we're like, today, we're like, this is for sure the best thing that we should be doing until it's not.

[00:26:56] You know what I mean? How do we know? We don't know. So [00:27:00] it's interesting. So one of the the emotions that you helped me identify with your team that was very strong in my like two emotions was disappointment and judgment. And I didn't have any insight as to how those two emotions showed up everywhere. And then the reflectiveness of those emotions, the fact that if I'm disappointed, I'm afraid that person is disappointed in me or I'm disappointed in me in how I didn't have a sense of that at

all. And it is become I was judging people for not taking my advice. I was judging myself for not being able to convince them to take the advice.

And once you let that go as a physician, I think it's just so transformative. Ai doesn't mean you're not doing great medicine, doesn't mean you're not showing up in a loving and amazing way, giving all the best current advice. But they get to leave the room owning their path. I'm so freed by that. It made me so [00:28:00] much less frustrated at the end of the day, believing, first of all, that they weren't doing the right thing. But then second of all that I wasn't doing the right thing, right? It's a lot of pressure that we put on ourselves. I mean, back in my day, right, it was like, can you convince them to take the vaccines? You know, that was a huge part of it, right? There's so much pressure from the outside organizations and the public health departments and everything.

[00:28:20] Like you got to get people to, you know, vaccinate their children. And I'm like, oh, look, I'm doing everything I can, like, you know, and but still feeling like responsible for that. And with time and maturity and just experience, you know, I got to that point where not to the point where you are, which is like much cleaner. But, you know, I did get to a point of realizing, you know what, Like I literally cannot give you 20 minutes extra right now to have this conversation. Like we have to move forward because other people are waiting and like, you know, I've educated you.

We talked about it and like it's going to be, you know, you sign the form and off we go, you know. And [00:29:00] I don't want to sound the least bit impertinent on the topic, but it's been very helpful to me to find my more light hearted side on this topic with patients. I came to your program in 2021, so you know, we were that far into the pandemic and I had decided in the months before I joined that, you know, patients that refuse to get the vaccine, it was just a slap in my face and they were putting me at risk. And that's when we were still wearing n95s and all of the scary things were happening and we didn't know as much all the things, and we weren't vaccinated.

[00:29:35] So the vaccine comes out and, you know, have a lot of patients that are like, No, like, I'm not getting it. And then the next thing that humans that don't want to get it do is they say, well, I don't know enough about it. And if you could just explain it to me and. I found a light heartedness that I hopefully again wasn't like disrespectful. And I'll say, Well, I have a couple of resources that I can send you to that for sure guide

somebody through kind of the first [00:30:00] level education. And they would say to me, No, no, no, you don't understand. Like, I need you to explain this to me.

And I said, Well, I think I'm going to need you to take an immunology class before we come back and address this. You know, it was a little startling, but fundamentally, what I was able to help people say is there's no way. Right. Even if we had two hours, even if we had two weeks, that we can bring all the background that you think you need to make this decision. Right. And the bottom line is you don't need information to make this decision. You've decided you're not getting it because you're scared. No problem. Then I had empathy. Then I didn't think I'm discharging every patient. That's not going to be immunized.

[00:30:39] You know what I mean? I'm like, Yes, they're just scared. It's okay. Everybody's allowed to have a different opinion. I don't need to jump through hoops. It's okay. And it's not so oppositional then, right? Like you're not fired up so much emotionally throughout the day. Yeah. No, and this is such a tough thing because a lot of people are like, No, no, it's our job to convince them. [00:31:00] And I'm like, I think everybody should think about it in a way that serves them and their patient population is think is the way that they that we just have to look at it right? And be open to the idea that each person as a doctor, right. Like gets to figure out what that is like.

Burning yourself out over believing that it's your job to do that. Like, like I'm not sure what the positive outcome is from that. Ultimately, this is this just bridges to me into what the reason why coaching is so perfect for these scenarios, both one on one coaching, but even better group coaching which you know I had no idea when I entered your program that I would be so enthralled with. It's because you're not just bringing your own thoughts to a coaching session one on one. You get the power of seeing other physicians thoughts and how they're coached around that. Now their outcome, the final thought that they create or [00:32:00] the emotion they decide to sit in might not be what I create for myself.

[00:32:05] But that's great. I still get to watch the process of how they find peace in their own thinking, which really still offers it to you, right? You're like, Maybe that's not the thought, but I'll find what thought works for me, right? Like, Oh, I can't say enough about group coaching. It is so powerful. And I think often when someone else is being

coached, we are more open to the actual coaching because it's not us. You know, when we're on the hot seat, it can be hard, right? Then we're really entrenched. We're like, No, this is my belief. You know, sometimes it's a lot harder, but when we're watching, we're like, Oh, I see what's happening there. And then we go, Wait, And how do I do this too? And it can be huge awarenesses around that. So good. You didn't know you had that thought until somebody else said it. And you're like, Oh, I think that way too. That's fascinating way to have awareness.

Or you're just so proud of them for bringing something up that you may not have had the [00:33:00] courage at that stage. And, you know, everyone's holding space for that person. And so you have bravery about bringing up topics, you know, at your next coaching or at your next group coaching opportunity. It's so powerful. It really is. And creating that safe space where it really is like, you know, we get to talk about all those hard things here, like things that, you know, we mean there are a lot of people who are like, I've never literally never said this out loud before, you know, like, nobody knows that I think this, But then they're bringing it to a group call that just speaks to how safe they feel and how held they feel by the group, which is, Oh, it's so good.

[00:33:37] There were people over two years that I had the privilege of watching, getting coached that never talked about weight. It's so powerful because the reality for me is I emotionally eat so in being with you. And what's your hurry and why am I rushing in the very beginning moments? It was the awareness that until I identify my [00:34:00] emotions that I'm eating, I'm never going to get this in the place that it needs to be and have the freedom from food that I have now. Yeah. And it even saying that to you is a little challenging for me because I'm a perfectionist.

So if I don't have 100% freedom from food and I've done a ton of self coaching and coaching on this to say to myself, what is B-minus? Work in my charting? What is the percent of freedom that I need to have to declare it? And it is so powerful to be able to say, I have freedom from food. It's amazing. So good. Well, congratulations. I mean, honestly, like, I just feel so honored that, you know, my team and I were able to, like, guide you toward this, you know, because you did this like, you know, we met you, right? We met you and helped you.

[00:34:49] But I just want to point that out, right? Like, to your point about, like, thinking it's outside of us, like we didn't do it for you. We can't do it for you. We're there to just show up and show you your mind and show [00:35:00] you what's going on there. And when you are in a place where you're ready and open to think about those things and explore, that is when you just make amazing progress, which is exactly what you've had. So it's so good. It's the tools. You continue to give us all the tools and all the awareness.

And I know that the change ultimately came through myself, but the tools, they're so beautiful. They're so amazing. Oh, so good. All right, Geri, thank you so much. So I just want to wrap, though, with you sharing what you would tell somebody who maybe is similar, similar to you, you know, like is in on a similar process or, you know, maybe not brand new in their career, you know, just in a different stage of life, you know, kids out of the home, like things like that. You know, there's definitely a lot of thoughts that people will have about what's possible to them in different seasons of life and different age groups and things like that.

[00:35:54] I would just love to know what you would tell somebody who's thinking about weight loss for doctors only program or, you know, trying [00:36:00] coaching as an option, What would you let them know? I'll get choked up here. So one of the things you taught me or guided me through is to not be afraid of my tears. So thank you for that. Because for sure, they just reflect how strongly I feel about all of this. And this program was the greatest gift I've ever given myself.

And for a person that believed they had to serve other people. Giving yourself the greatest gift is a little challenging. So for any human, any woman physician in practice who is suffering, I would fundamentally say with anything, you know, in my case, food, an extra glass of wine or scrolling on social media to just turn your mind off when you're uncomfortable. For any of those buffering behaviors, this program will transform your life.

Wow. That's amazing. Thank you for saying that. [00:37:00] And I know you mean it. I really know you mean it. Oh, my gosh. I do. Yeah. Well, Geri, thank you so much for your time for sharing your story so generously. And it has been just a super pleasure just working with you and and helping you to get to where you're at. So thank you so

much for that. Thank you, Katrina. Ready to start making progress on your weight loss goals. For lots of free help, go to katrinaubellmd.com and click on Free Resources.