



# WEIGHT LOSS FOR BUSY PHYSICIANS

— with Katrina Ubell, MD —

[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 the podcast today. So I have talked on this podcast before in the past. I've just kind of actually alluded to it. I don't think I've actually spoken about it really in any sort of depth at all, is that we have actually been behind the scenes for the last couple of years doing a study on our members [00:01:00] of our weight loss for Doctors only program to see how well our program works. Like, does it actually work?

I'll give you the CliffsNotes version. Yes, it does actually work. If you have bought my book, then you know, also in the appendix we have some study results. But I invited two of the women who did the absolute bulk of the work of doing our study, designing the whole thing. I mean, just putting the whole thing together, processing all the results and creating the analysis of the data. I've wanted to invite them on to talk more about this study and to share a little bit more about it with you. It is been a really fun experience to study how well our program works and to learn from it, and not only just from a weight loss perspective, but from a general health, from a wellbeing standpoint, also with stress levels.

[00:01:49] And so I wanted to have me Mia Woodward and Elisa Boden, both of whom are amazing women physicians themselves, to come on and talk about the study and share a little bit [00:02:00] more about it. So we kind of talk from the beginning to the end, like kind of where we were when we first started this and what even gave us the

idea in the first place. And fast forwarding that to, you know, several years later to today. So very excited to share this with you. Like I said, what we found out is, wow, this program works. And not only does it work, it works really actually really awesomely well. So with that, I will leave you with my interview with Mia Woodward and Elisa Boden. And hope you enjoy.

Mia and Elisa, I'm so glad you're here with me today. I think this is my first interview for this podcast where I've had more than one person, so I feel like vulnerable. How do I make sure everybody gets an opportunity to talk here? But let's just start off with each of you introducing yourselves to the audience and just letting them know who you are. Let's start with you, Mia. Hi, my name is Mia Woodward. I'm a clinician scientist and also certified life coach. And I also do research in the face of life coaching. Awesome. Elisa. Hi everyone. I'm Elisa [00:03:00] Boden. I am a gastroenterologist in Portland, Oregon. I work at Oregon Health and Science University and am also a certified life coach. And I do coaching for.

[00:03:11] Physicians on burnout and also coach patients who have inflammatory conditions of the GI tract.

[00:03:17] Okay, so we're going to tell a little story. Story time is what it is. We're going to tell a little story about how we came to actually study our program and to see the results. So I'll start with my recollection of how this all went down. Then you both can have the opportunity to tell your side of the story and then we'll just go from there. Okay, cool. So I'm running this business, doing this weight loss for doctors only program and trying to make it as best as it can possibly be and always trying to make improvements and really seeing that it was working, you know, really seeing that clients were really getting some incredible results.

And it had actually [00:04:00] crossed my mind at one point or another like, oh, wouldn't it be cool to actually be able to do a study on this and be able to prove what we're seeing as just sort of anecdotal evidence right now? But I do not have the background to do that. I am the last person to be asking to set that kind of stuff up. And so I had my play plentiful with lots of other things. And so put that immediately on the back burner or maybe even just thought, Oh, I don't know, I probably won't ever do that. And so then at

some point and I don't even remember dates now, so maybe you both remember better than I do.

[00:04:35] I don't even remember which of you I don't remember who specifically even reached out, but somebody reached out and said it was dry. Was it dry? Yeah. Okay. So, yeah, so. So. Andrew. More so. She was who we called dry. She was involved in this initially as well and was kind of like, look, there's a bunch of people who we all know each other now from being in your program and we've all gotten these great results. And so dry [00:05:00] is an ob gyn.

But she's also obesity medicine, trained, fellowship trained. And so she really is working like boots on the ground, helping people to lose weight on a regular basis. And she was like, you know, I think we really you should really do a study on this. And I think I said, like, that sounds amazing, but I can't do that. If you guys want to do that, that's totally cool. But you need to organize ourselves and come and let me know like how this could work. And so that's exactly what happened. So I'm going to turn it over to both of you and we'll go from there. So at least to let us know kind of how that all came about on your end of it.

[00:05:35] Yeah. So the Reader program I started reader program in the beginning of 2019. And through your program I connected with a big group of women who were all, you know, we all had our lives profoundly changed by your program and the connections that we made with each other as well, especially at the beginning of the pandemic. I think this is when this was all kind of coming together. So we had created [00:06:00] a group chat and a marcopolo group where we were talking to each other essentially on a daily basis, helping each other navigate through this very hard time in life in general, and also helping to support each other through our weight loss journeys and through this group.

We kind of looked around and raised part of this group. And, you know, again, she's obesity medicine trained. And we were looking around at each other and just recognizing that the vast majority of us had lost a very significant amount of weight. In your program. And we were all people who had tried to lose weight through many different avenues. You know, most of us having done multiple different things to try to lose weight over time. And really none of us had been as successful as we were in your

program. And so, again, just looking at the proportion of people in the group, we actually sent out a little survey to each other in the beginning just to see like where we had all started and where we had ended up.

[00:06:56] And we recognized, I think it was like, I can't remember the exact [00:07:00] numbers, but you know, again, like over 80% of us had lost like more than 10 to 15% of our total body weight. It was very, very impressive. Both Mia and I are scientists and like to do clinical research and study things, and we just really felt compelled to see what had happened in the larger group. Was this just a phenomenon of our little piece of the group or, you know, were the results looking so good in your entire program and. We again, we have this idea that probably they were just based on everyone that we had met through the program.

And so Ray offered to put it out to you to ask you if you would be willing to have us do a study of your program. And I have to say we were a little nervous that you might not take us up on it just because it is, you know, a vulnerable position to actually study the outcome of people in your program. You never know exactly how it's going to come out. But we felt very confident that we were going to see some amazing results. And you decided to take [00:08:00] a chance on us.

[00:08:01] Yeah, well, and I always just looked at it like because you're right. Right. Like, what if we did the study and it was not good? But then I thought, Well, but that's really good information. Then we have a place to start from and then we can make some tweaks and try to make it better. And then it won't be just like mean. I love intuition too, but it won't just be from like, you know, kind of like, well, I have a sense or I just have a hunch it'll be like from actual data and being able to make decisions and choices based on that. And what I thought was so good is when we first started talking about it, it really was kind of like, you don't ever have to tell anybody these results if you don't want to, you know?

I was like, Oh, yeah, okay. That's, you know, that's really good to know. But, you know, I was just remembering as you were talking, I mean, one of the things that was also attractive to me in doing this was life coaching still is such a new kind of modality. And to be able to potentially maybe sometime in the future through actual study results, legitimize the role [00:09:00] of coaching as a true, useful modality. That's not just like

an eye rolling kind of, you know, type of a thing for weight loss. I thought, well, this could really advance, you know, even bigger picture. It could help the whole industry. It can help more people to take a chance on coaching, especially when they've tried lots of other things and it hasn't worked. And so I kind of was a little bit like, well, I mean, what is there to lose? We're going to find something that will be useful out regardless. So that's kind of where I was at. So Mia, what were you thinking when you heard that? I said yes.

No, I. Mean, I love it. Well, I think it's also hilarious because we're going to change your mindset that you don't have a background at all because you really what you're expressing right now is the mindset of a curious scientist. Right? And that's where I love this work. I love bringing research into spaces that are new, right? Because life coaching is something that we really look at the person holistically. We don't want them to be a statistic. We don't want them to be a number. We want it to be about the whole person.

[But the beauty [00:10:00] of. Data and science is that you begin to understand. And you glean. Things about populations of people, right? Not your one person, and then your next one person. You can say like, Well, what is a whole Is this working as a whole with my whole group? And if it's not, in what ways is it not? And the best scientific questions are ones where, like if you get a negative or a positive answer, you still learn something. And I think that's really what you just expressed. Like even if it was like, Oh my gosh, my program isn't as successful as I thought it was, I'm just looking at the best clients and what do I need to change to really lift people up because I want this to be the best program means you have to take a look and you have to mean.

[00:10:36] This is where. My business in this space really is. Why you express my passion perfectly is because if you're not curious and you don't look, you might never know. And you can't make it better to really help lives and change lives. And I think that's the critical step that what you did. I mean, we were talking before the call, but it's really an analogy for every person, right? You have to be brave enough to try things out that you might not might [00:11:00] not succeed. And and you'll learn something either way. And that mindset of. Openness.

[00:11:06] And curiosity and like, you know, I don't think you would have beat yourself up either way. You would have been like, oh my gosh, we need to do something different if the results had been different. But they weren't. They were great, right?

[00:11:15] And and and I still Think even though they are great, you can still learn things, right? You can still be like, oh, wow. Like there's still even more to learn regardless. Oh, it was very eye opening. It was still really, really, really. Yeah. Helpful to go through the whole process for sure. Absolutely. And I think also, I mean, let's be honest, life coaching is a completely unregulated industry. And so, you know, what I also liked was the idea that even if somebody had, you know, maybe went out on a limb in some fashion and worked with a coach in the past, you know, maybe they felt like they were sort of burned or like overpromised underdelivered, you know, like just they were like, I've tried that.

I really am scared to try a coach again, you know, [00:12:00] Then we would have something else to show. Like we're not just people who just like hung up our shingle and said, Hey, we can help you with this. Like, there's actually a lot that's behind this. And, and I think, yeah, it just helps to give people an idea of what happens around here. Basically, you know, that is medicine, right? The three of us are all positioned like we understand that, like, you know, you should you should be held to your results. I mean, you really should. It doesn't mean that you have to pivot your whole mindset. Based on the results you get, but the results that you get are a result of the things that you do right and the actions that you take.

And so you need to be open and honest about what those are in order to really help more people. And if you're someone who's finding a new person to help you, if you want a surgeon to help you, you kind of want to know how good they are at surgery. Right. So exactly. Exactly. How many times have they actually maybe done this procedure right. How were their outcomes or their outcomes? Exactly. Exactly. Exactly. Okay. So I said yes. And then what happened behind the scenes [00:13:00] for all of you?

[00:13:02] I'm trying to remember how this played out. I mean, I think, you know, again, it was in the pandemic. So I think several of us had a little bit of extra bandwidth during that time, especially me, for. We had a lot of procedures shut down. And so I think Mia

and me and Dre met together and started outlining what the things were that we thought would be really interesting for us to look at. Well, and I mean, honestly.

[00:13:26] Katrina, you have such an A+ behind the scenes program, too. I mean, the people we work with on your team were like, they were impressed with us because we came prepared, but we were so impressed with them because their execution and their like, you know, you have systems in place, right? So like they were able to really we had to work out some of the details. But between Lisa's experience, my experience dray's like fund of knowledge and your team, it just, you know, it really started in the winter of 2020. Our first cohort enrollment was January of 2021. But what I loved about your team was that they also [00:14:00] and I know you were behind us, but you had team meetings with us as you were very focused on the privacy of your clients, their needs and wants.

You know, everything was de-identified. We got consent. But you also just your team was approaching it very much from like, what will their experience be like, right? Like, just like we say in medicine now, like what's the patient centered experience like? That was the ethos that was brought to this, which made it, you know, as accessible as it was for engagement. And I really wanted it to be like whether you signed up for the study or you didn't, you basically had the same experience. You know what I mean? That it wasn't like nothing particularly good or bad was going to happen for you extra whether you participated or not.

[00:14:40] And and it was nice to be able to really, like, think through like, here's some stuff that we could check. This is like the easiest way to do it, the least amount of work on their part. And, and I've also figured to I'm like, you know, just considering that we work with doctors, there are going to be decent group of people who are going to be like, Yeah, sure, I'll help [00:15:00] out with, you know, that makes sense to advance science. Yeah, I'll do that. And yeah, I mean, it really was I think from our end, I really kind of looked at it like I wanted you both to be able to do what you do well and don't think there was any concern, at least from your part of anything, you know, you feeling like you had to massage anything or you know, anything to that extent.

But I really did want to sort of keep it clean. It's like we're over here providing the data and then it goes to you and then you both are crunching it all and looking at it really like

separate from us, you know? And I think that helped it to be, at least from my perspective, very clean in that way. I'm not like, And what is it showing now and what do you think now? You know, it's like when you're ready, you'll let me know. One of my collaborators who I love, like, look, you know.

[00:15:48] Science is like dating. You know, you go on a couple dates and you feel.

[00:15:52] Like each other and you get married. And I think we were just like an easy first date. Like, we all we all had the right ethical principles behind, which is what you're alluding to, [00:16:00] the ethical principles of like why we were doing this. Our purposes were very much aligned and it was really just ultimately to help the program and also to help some people learn about the program so we could really share those results with the world in order to like highlight what's possible. Yeah. And that life coaching isn't just mumbo jumbo, Weird stuff.

[00:16:19] Elisa Yeah, I was going to say, I was just also so impressed at the willingness of your clients to participate. I think almost everybody agreed to participate, which again just says something about what, you know, that doctors think that it's important to know what's going on and in a program that they're joining. And it was wonderful to see that, you know, again, I think it was like 90 plus percent of people said that they would participate.

[00:16:44] Yeah, that is very, very cool. Yeah. And I think it just speaks to the group of people that I serve, right? I think like 96% or something. It was like 97%, like a couple people didn't want to. Of course, like that's the point of informed consent. But you know, it's [00:17:00] super high. Everyone's like, Oh, they just we get it right. Exactly, exactly, exactly. So we did that first round of data collection. So. Well, actually, will you just explain the study design a little bit? What did we actually do? Sure. So for the so we did a survey at intake before people started the program, and we did a survey when they were done with their six months. Of the program.

[00:17:21] And the survey content included things about their weight and before and after the. Graham, as well as their overall health and their stress levels. We deliberately kept it pretty simple and short because the survey and you still have to it take it and it takes time to fill it out. And that's you know, that we thought that was an appropriate



length. That's what we did. We just did two surveys, intake and and after the program, did we ask them for some measurements, too, or no? Yes. Yes. Okay. Thought we did, too, because I thought I remember we sent them measuring tapes. Yes. Did it was so smart. That was again, like another behind the scenes like how to make this easy, like for them. Right. That was so smart. [00:18:00]

Yes. So when I say, wait, I don't mean just the number of wait, we did, you know, BMI, so like height and we also did waist. So some key characteristics centered with obesity that have been studied in the peer reviewed literature. This is where, you know, we do have data from other work that's out there that we could make sure we did it the best methods possible. Cool. Okay. So then we left them alone for six months and let them do their thing. And then we asked them for the survey at the end and collected that data and then off to the races. So what did you find with that first cohort? Yeah, So?

[00:18:38] Well, we actually. Enrolled two cohorts. Oh, that's right, because we enrolled a second one before we even finished the first. That's right. That's right. That's right. So but total three. Right. But there was a total three. What we've published so far and what we can talk about today right now is the results of the first two cohorts. So we analyzed and so it was two separate groups that started at two separate time [00:19:00] points, one in January of 2021, and then another the next cohort that you enrolled. Yeah. So we found that overall, 80% of your client lost 5% of their body weight or more, which is great, an amazing thing. And but really kind of like just hard pause there. Like, that's crazy. So 5% of your body weight over that period of time is unbelievable. The average was about 19 pounds, but that kind of varied by how much you had to come in, losing, how much you wanted to lose or need or desire to lose coming in.

[00:19:34] A lot of people came in actually Either slightly overweight or and please, these terms are all from medical literature, like their BMI was close to normal BMI. Again, I hate these normal terms, but we can. No, no. I'm sure you fight them all the time. Oh, my gosh. So anyway, they had less weight that they wanted to lose and other said more. And so there was a big range of how much people lost, but on average it was 19 pounds. [00:20:00]

And honestly, for. Me, I think a really big thing too was that people self rated their health better after the six months. Like the measurement tool that we use for Self-rated health has been highly correlated to morbidity and mortality, right? Like, and if you say that you're going to that you feel really sick and you're not, you're you are in poor health, you are way more likely to die or have some major illness than another person who rates their health as excellent, like where we understand our own bodies a lot more than we're giving credit for. And people reported their health much better at the end of the program. And in addition, they reported their stress level went way down. And so those can't be I mean, who knows? It's like a chicken and an egg.

What came first? Is it the weight loss that led to the stress. Reduction or was. It the stress less that led to like they're all tied up together? But that's huge. I mean, to be able to feel better in your body, to be less stressed and to lose weight, it's like I mean, and I will say for like the space validity, it's exactly what happened in my own life. You know, that's [00:21:00] I mean, I like Elisa. We joined around the same time January 19th, and that's really just it's changed my life. And I know I've been on a separate podcast with you, as is Elisa, but those overall results really correlate with my personal experience.

[00:21:14] To think that was one of the things when we had come to you with this study saying, you know, we feel like this program has improved our lives in so many ways. It's not just been about the weight, right? It's been about feeling better about ourselves, feeling better about our lives, having less stress in our life, being more accepting of ourselves, you know, independent of the weight loss. And so we think we felt like these were really important measures to study as part as part of studying your program as a whole.

[00:21:45] I'm really glad that you both thought of that, to put that in, because you know what we see on the back end, you know, whether it's someone telling us through a survey or even just people will just email us, you know, of their experience. And and what people [00:22:00] will say is, you know, I lost 40 pounds or I weigh what I did in high school, but that's not the best part. You know, the best part is I love being a doctor again. I'm so much less stressed. My relationships are better, you know, all of those things. So so to your point, right, it is a little chick in the egg, but it's like you don't need food to solve for those other stressors in your life, those other challenges in your life when you have other help. And so coaching helps with that.

So then it's easy. You're to not overeat. I always think of it as like if you have all these other problems going on in your life and food is what's getting you through and then you're trying to lose weight and someone comes and says, Yeah, okay, we're taking that food away. You know, I kind of think about it like from like, say you're in the ocean and there's like a life ring and you're just hanging on to the life ring and you're just keeping your mouth, you know, above water. And the life ring is the food in this scenario. And then someone's like, okay, taking the life ring away. You just have to tread water. Like you can only do that so long and maybe you'll lose some weight before you [00:23:00] need the life ring again because you're getting exhausted.

[00:23:02] You don't have you've kind of run out of other solutions, your ability to tolerate that. So then you're right back to eating again and the weight comes back. And rather than thinking about it like, you know, we need like the life ring, I'm like, how about we build a boat around you so you don't need that anymore? And that is what I think we're doing with coaching is like making it so you just don't even need the life ring anymore. You don't need that food to get you through. And so that makes weight loss a lot easier and that makes maintaining your weight loss a lot easier.

So it's cool to be able to see all of that, you know, because so many of us think like if I just lose weight, like then life will be so much better. But there's a lot of thin people who are really miserable and like really not happy. So, you know, it's nice when we feel good in our bodies, whatever that means to us, whatever that looks like for each of us individually and independently. But then being able to work through all the other issues makes it a lot less resistance to maintaining that and staying in that place. And so it's so cool to be able [00:24:00] to see that. I'm a big believer in taking analogies way too far. So I mean, to your point, taking the light ring away, all of a sudden you're like treading water, right?

And you can use willpower and you're frantically think, but if someone teaches you how to swim, you. Can just like. Learn about the ocean, right? You're just like. Oh, I don't want to swim. Like, I don't have to. Like, tread. And like, that's I think, what. This was for. Me. It was like. Oh, wait. Like I'm using food to like, buffer my emotions. Like, whoa, like, what am I actually stressed about? Like, what is actually like, what's going on here? And, you. Know, I think my biggest thing with science, which I love, which I also loved

with your program, is it opened me up to curiosity, like going to my pantry and be like. Oh, I'm eating for emotional. Reasons. Why.

[00:24:46] You know? And so I love that about like both science and how you approach this program because, you know, we created a structured protocol and then when I didn't want to follow that protocol because I wanted that thing, you know, I was like, huh, I wonder [00:25:00] why I'm going that way. And it just inserted this beautiful pause, right? And so I just learned how to swim with like the things that come up in life and the waves of emotions to use analogies from meditation. Right? Like, waves are always going to be there. It's just how you swim.

So. Yeah, absolutely. So, okay, so we found that out. I do want to just speak to a couple things because we just we really just measured six months. And so I do just want to say that it's not actually that unusual for us to have a member come into the program who thinks she's like, Yep, ready to I'm going to do this weight loss stuff. And within a couple of weeks it usually becomes pretty clear like we're not actually ready to do that and, you know, to lose weight. And that could be for a variety of reasons. Maybe this individual has, you know, participating in some bingeing behavior.

[00:25:51] And we need to focus on stopping that first. Maybe they're in a position where there's actually just a lot more kind of coaching like [00:26:00] sort of thought work, emotional work that they would really benefit from first because otherwise weight loss is super challenging and really difficult for them. So they do end up losing weight eventually, just maybe not so much in those first six months because we need to sort of almost prep the runway to be able to get them to the place where that weight loss can be. Not a horrible, miserable experience, and it ends up being, you know, long lasting. And so those kinds of experiences aren't really reflected here.

Right? So you might be like, oh, but like those people who didn't lose weight while it was going on with them, that's probably what was going on with them. You know, like there were other things going on. So not to say that, you know, bigger picture, they didn't get what they needed or get those results, But and then also, sometimes we have people who become pregnant while they're with us. So, you know, which is amazing, but also may affect the amount of weight that you lose. Right.

[00:26:52] Katrina would also say there were some people who came into your program really without a lot of weight to lose who came into your program [00:27:00] after they had listened to the podcast for a long period of time and had kind of lost their weight and wanted to be in the program to learn how to keep it off. And so I'd say those people were there, too. And then also, I think if you look at our study, because we were looking at everybody who enrolled in the program, we weren't only looking at people who had the most amount of weight to lose.

So I think a lot of clinical trials really are looking at people who are quite overweight. You have to be overweight to be in the study. And so, again, I think when you look at these results, you also have to recognize that many people didn't have a huge amount of weight to lose if they were overweight. They were, you know, not very much overweight or might have come in, you know, again, not wanting to learn how to lose weight, but how to maintain weight. Right, right, right, right. Well, and I think like that's why also like the timing of this study in your program. Right. Because you're not. I mean, of course. You want to help people with this issue, but I think it's because you want to help them as humans. Right. You're not chasing a result for them? No. There's plenty [00:28:00] of other people doing that. You can go hire every trainer in the world if you want that. Exactly.

And so, like and if you were like, oh, no, this person's not meeting my metric, I'd better drop them from the program. I mean, like it. It wouldn't even cross your mind. Like, it's just not even the point, right? Like, it's actually not about the weight, right? It's about helping the whole human, which is like when you come in. You're met where you're at. So I think that's really the data is never going to reflect that. The stories are going to reflect that and or like, you know, you can do rigorous qualitative interviews and really break down the subgroups. And here you can do methods to really understand why different groups have different results and understand those. But, you know, you don't want to. What I love is that that's not the point. Like, the point is to meet you where you're at. So. Exactly. If it takes you a year to be or longer to be ready to actually lose weight, then like we're all in for that, like totally fine. We're not like, shoot, this person is skewing our numbers or something, right?

[00:28:55] That's the furthest thing from any of our minds. Yeah, yeah, yeah. So there [00:29:00] are some other data that I think is actually important to note just because Semaglutide is, you know, all the rage right now, very, very important or like very something that a lot of people are interested in right now and helping a ton of people, but also not the right thing for everybody. And so can you speak to what we found kind of our program in comparison to using that medication?

[00:29:22] Yeah. So, you know, again, I think we can't exactly compare apples to apples. We didn't have a randomized control trial. This was a different group of people. These were people that were not, you know, again, not regulated to start out being a certain amount of overweight. But, you know, I think probably the best data we have around Semaglutide and Tirzepatide for the treatment of obesity show that patients are losing between 10 to 20% of their total body weight in 6 to 12 months. And so, you know, I think our program really showed that we are achieving similar results there. Again, we can't [00:30:00] really compare head to head because this was not a randomized control trial.

And, you know, I think these medications I'm not an obesity trained doctor, but I think these medications are really helpful and can be important part of the care of people who are struggling with obesity. But I also think what our results show is that coaching and behavioral changes can be quite effective for the vast majority of people, especially women physicians, who are highly committed to fully participating in this kind of a program. And that for many of us who don't want to be on medications in the long term, or even some people who might want to try medications, that this can be a really important additional piece to the puzzle.

[00:30:44] That's the way I think about it, is like that's the right thing, like for you to use. Amazing. And then also the supplemental, you know, thought work coaching is so helpful in making sure that the results, you know, stick. And last and again, you know, many of those medications are still very [00:31:00] new, big picture wise. Right? Like we just don't know. You know, and I'm not even talking like safety profile wise or anything, but I'm just talking more like what happens in five years or ten years or things like that. And so having worked on your brain and having, you know, the skill set of knowing how to support yourself emotionally in other ways, I just can't imagine that that's going to be like a bad thing or not useful in some way like that. I think.

I think it is something that that people would be really, you know, happy to have as as an adjunct kind of a thing. And then it's almost like maybe this isn't the right word to use, but I'm like, it's kind of like an insurance policy. It's like you're doing all that hard work using that medication, you know, dealing with whatever side effects or whatever there might be. And then this is going to be hopefully the way that you're able to maintain those amazing results. So super cool. I mean, I think so much of this is at least as that tooting her own horn enough. So now it's my, you know, my job to do that for her. But, you know, she's created an integrated program at OHSU for [00:32:00] GI disorders that does combine the medications that they used and coaching.

[00:32:05] And, you know, this just can't be an either or. It really you you can't I don't know. I think we rely on medicines for a lot of things, but they don't always solve the whole problem. You know, in ophthalmology we rely on medication. So I'm an oncologist and I don't think I actually mentioned that at the beginning, but we do rely on a lot of medications, of course. Diseases that we treat and surgical interventions. But you really you have to look at the whole person and the whole person has a lot more going on that really feeds into this. You know, we are learning that what, 80 to 90% of health outcomes are based on social determinants of health, right? And so you have to look at the whole picture of the person.

And it's not going to be an either or ever. And it's just a question of the dial, right? Is it how much of the medicine is helping you versus how much of a mindset can help you and learning for yourself what's best for you in that regard? And [00:33:00] you know, what other factors in your life play in that need to be addressed takes that whole person aspect going back to sort of the holistic approach. Absolutely. Absolutely. Super, super cool. All right. So I mean, ultimately, we were just well, I'll just speak for myself. I saw the initial results. I was like, this is so awesome. How cool.

[00:33:21] And not surprising at all and not surprising to any of us at all. Really. And what was. the range of weight loss? Again, I feel like I have it somewhere, but like the total range. Yeah. So people lost everything from a couple pounds all the way up to like 70 pounds. People did great. So my favorite day in my research is always results day. It's like.

[00:33:43] It's results day because you get to.

[00:33:45] You get to learn something that day. So it is a fun day. But yeah, people less and that's just in six months to lose that much weight and 70 pounds in six months is amazing. So whoever that person was, we don't know their de-identified. But yeah, but we, [00:34:00] you know, we spoke about some of the people who don't really have that much weight to lose, but we definitely have people who come in who do have more weight that they want to lose. And, you know, I've seen it many times where like 70 plus pounds in six months it can happen. You know, you just like kind of set that body up for success. And it's obviously not a guarantee that that will happen. But for for some people, it's just like the body.

I always think of it as your body is just like, Thank you, thank you for doing this. I will gladly shed this. You know, it's it's really so great. I mean, I've said this before to you, but it was almost like just just this release, you know? I mean, I really do think this and I think stress does play into that as well. And we've talked about all talked about this. It's just when you have like a way to really create success for yourself and to guide where it's still on, you know, just like the research study, like we this team of us, we did this study together. We had to do the work. But if you create a team to like, do it together, first of all.

[00:34:58] It's much more fun than [00:35:00] trying to do it by yourself. Like with weight loss and with research.

[00:35:03] Like team science is always the best, like having a team to support you while you're trying to lose weight is the best. And and then it really can. It's okay. It can be hard, but it's okay if it's easy to. Right. Exactly. We can let it be easy. Absolutely. All right. Well, one other thing that just came to mind that I feel like we should mention is like we actually paid you guys to do this. This this wasn't like a volunteer thing. This is like if you were compensated, you know, hopefully fairly for your work on this. And so now you are bringing this service to other programs as well. Or, you know, why don't you talk a little bit more about that just to to share what you're offering. Thank you, Katrina. That's so nice of you. So yeah, have a website [miawoodward.com](http://miawoodward.com). So I made an LLC from this because I really am inspired.



My life was changed with your coaching and with the coaching I've received, and I really do think that it's the time where we should be talking about the results that [00:36:00] we're getting, not that we need to tie ourselves up in that, but I did create a business to really help look at results of other programs. I've had worked with some other clients as well. Not surprisingly, a lot of my clients have been physicians because we really do care about the outcomes that we give for people.

And so have a business. Where I do this is called perspective coaching analytics, and we try to be curious with you and same thing like try to really understand what's going on with the program and then with your decision making, share those results with the world so really more people can understand the power of this work because it is life changing and we do deserve to make it better and make it better for the clients that we want to serve. So yeah, I've been loving this work. And Elisa, for your program that you are like for people who are listening who are in Portland area, Can you tell us a little bit more about that?

[00:36:52] Yeah. So I'm the director of an integrative and complementary Medicine within program. So [00:37:00] people who have gastrointestinal diseases that range across the gamut can come to our center and learn how to get holistic care and then also coach women who have inflammatory bowel disease. You can find me at [healthymindsetforibd.com](http://healthymindsetforibd.com) or look me up. Elisa Boden Yeah, we're again, you know, wanting to bring coaching into medical care. We've seen what it can do in weight loss, and I think there is a lot of promise for what it can do for other management of chronic disease.

[00:37:30] Absolutely. That's so cool. All this from you guys just being like looking around going.

[00:37:36] There might be something here on this.

[00:37:38] So anyway, I'm super grateful to you both. It's Andre, too, for, you know, initiating it. It was just it's been a great experience and really fun to see. Like, you know, it is really fun when you get good results. But even regardless, it was still just such a positive experience and something that, you know, really it's just nice to, like I said,

really actually have some evidence for [00:38:00] you to form some thoughts around and for decision making.

So thank you so much for both of you for following through on this journey with us. And you know, you guys put together all the data. We actually put this in the appendix of my book, and so you worked hard on making that all publishable and everything, and it's just been just, you know, so lovely to work with you both in this in this project. So thank you so much for that and thanks for being guests on the podcast yet again.

[00:38:26] Thanks, Katrina.

[00:38:27] Thank you. It's just been a wonderful journey Working with Elisa, Andre and with your team and with you has just been a wonderful experience.

[00:38:34] And thank you.

[00:38:39] Ready to start making progress on your weight loss goals. For lots of free help, go to [katrinaubellmd.com](http://katrinaubellmd.com) and click on Free Resources.