



# WEIGHT LOSS FOR BUSY PHYSICIANS

— with Katrina Ubell, MD —

Katrina: Welcome to the podcast today. I'm so glad you're here. Do I ever have a treat for you! I was so excited to bring Dr. Celeste Holbrook on to the podcast, because she's a sexologist and when you're hear that somebody's a sexologist, and p.s. she's married to a doctor, I mean who doesn't want to know more? Me, for sure, I want to know more. And I know that so many of you do as well. We have a fabulous conversation, so interesting. We just had the best time talking and I just ... I know you haven't even heard from her yet, but I want to strongly encourage you to check her out if you're having any issues with intimacy or your sex life in any way.

She's so normal. So down to earth. Really, just gets it. She's really, really great and has a lot of experience working with physician couples, so she is not one to be missed, and we even talked after the fact after we finished recording we talked about maybe doing some followup episodes where we could have her answer some listener-submitted questions. So if you have questions for her and want to bring those to the show notes page, the comments for the show notes page, that would be fantastic. So you can find that by going to [katrinaubellmd.com/80](http://katrinaubellmd.com/80) and she's fantastic so her background is she's a PhD and she facilitates discussions about women's health and sexuality. She says her mission is to help people experience better sex through planned mental and behavioral changes, so very much in line with what we're working on here. And she conducts online classes, presentations, writes, speaks and sees clients virtually and in person. So she's definitely somebody you're gonna wanna check out and she answers some really, really great questions on this episode, so please enjoy and I'll see yeah next week.

Hey Celeste, Thanks for coming on the podcast.

Celeste: Hi, How are you today?

Katrina: I am great and I'm so excited to have you on. I was asking a friend of mine who's a physician, "I think I found a sexologist I could bring on the podcast, should I do it?" And she just texted back to me, "Immediately. Yes!"

Celeste: That's awesome.

Katrina: I know.

Celeste: That's awesome.

Katrina: Hey, we're doing it, we're doing it. Okay so I wanna first start of with you answering the question of what is a sexologist and then I want you to tell us kind of your story as to how you became a sexologist and what brought you to this career.

Celeste: Sure. So a sexologist can look like a lot of different things. I am somebody who speaks one on one with people in my office or online over video communication. I also teach presentations and teach online courses, for me mostly to women, just to help them understand their sexuality better, our sexuality better and move their relationship forward if that's what they're looking for. Basically I'm like an educator, a coach, an encourager, all of those things rolled up into one.

Katrina: And a PhD though!

Celeste: Yes accurate.

Katrina: It's like legit. It's not like it's just hanging out like a shingle, "I'm a sexologist now!"

Celeste: Yes, yes. True true true. So I have a PhD in health education, behavior change. So the behavior that I study is sex. So I very much take an active approach for people to help them use specific behaviors and specific mindset exercises to improve their sex life.

Katrina: Awesome. Great. And then I'm assuming in kindergarten you didn't say, "I wanna be a sexologist when I grow up!" So ...

Celeste: I did not.

Katrina: You did not say that. So how did this all come about for you?

Celeste: That's a good question and one that I get a lot and it's one of my favorite questions because well when I first became sexually active I was newly married. I had waited to have sex until I got married and sex was really painful for me. Here I had waited. I thought I was doing the right thing. I thought it was just going to be magical and fireworks and it was not. But I didn't know who to talk to about it.

I just kept it kind of to myself for the whole first year. If you have ever been freshly married, you may know that the first year of marriage, things like resentment and anger and frustration are really hard things to deal with, and that was what was coming up in my marriage because of the painful intercourse, because now I didn't want sex and there was lots of back and forth about it. So finally I went and saw my ob gyn and I didn't know what else to do and my ob gyn told me that this would just go away after I had kids, but I thought that's just not the answer I'm looking for. That might be true, but at this point it was so much more than just physical pain, it was emotional pain, it was my relationship, it was lots of things.

Katrina: It seems so like putting the cart before the horse. You need to do this to have a baby, so just suffer through I guess, until you get pregnant.

Celeste: Just push through and it wasn't the answer that I needed and so ...

Katrina: And what if you don't want to have a baby?

Celeste: And I didn't.

Katrina: Oh and you didn't, right?

Celeste: And I didn't and since we're talking to a whole bunch of physicians, I ended up having twins via c-section, so it wouldn't have worked anyway! Right? So yeah it just wasn't the answer I was looking for. And so at that moment, I didn't know it, but at that moment I kind of became the professional I needed in my life and I started focusing my studies on sex and sexuality and kind of went on from there and got some certifications and I worked for a sex toy company for a couple of years as their health educator and then started my own practice once the twins were born, so ...

Katrina: So I have to know, how old are your twins?

Celeste: Oh they're six.

Katrina: When they ask what do you ... do you say you're a teacher? I have to know what you tell ... like you don't tell little kids I'm a sexologist.

Celeste: Well yeah because that was like the third week of kindergarten they were like, "Mom we have an occupation day at kindergarten." I was like "Okay." No, actually I tell them that I help people love each other better and I'm kind of like a teacher. And I say therapist to them, although I am not a therapist, I am behavior specialist so they can understand a little bit better, but to be honest I do have open conversations to my six year olds about sex. They probably know a little bit more than most other six year olds.

Katrina: I bet. I bet. Well who better than you to explain all the ... Awesome. Okay, so one thing that immediately also made me want to bring you on is you're married to a physician, so ...

Celeste: Yes.

Katrina: ... So you know better than most the medical life and he's ER. Is that right?

Celeste: Yes. He's ER. Mm-hmm (affirmative).

Katrina: So all kinds of ... I mean I don't know what his set up is like, but he might work different shifts and just always kind of catching up on sleep and things like that. In your experience, in just knowing him and knowing his friends and other physicians that you've maybe worked with, or that you know, what kind of challenges are specific to physicians in terms of their sex life?

Celeste: Their sex life. So yes. Yes to all those things. He does work a crazy schedule. It's very unpredictable and sometimes we feel like ships passing in the night, so we're not actually in the bed at the same time, which probably a lot of your podcast listeners can understand.

So for those reasons, those are a lot of the reasons why it is hard to connect sexually or intimately when the schedule is erratic or the schedule is highly structured and there's not a whole lot of margin in your life to connect intimately. I'm sure you talk about that in a lot of your other podcasts too. You have to be very intentional about time together in general, as physicians and so you have to be extra intentional about that time together intimately and in your sex life, so that's the biggest challenge. I have a whole lot of physician couples in the practice, simply because it is a hard thing to deal with and sometimes we need a little bit of help. Maybe we're not communicating 'cause we don't have the time to communicate about it. Or maybe we just ... things kind of float by the way side after kids or you know, when you're in residency all these big life changes are really different. And so sometimes you need a little help navigating those things.

Katrina: Okay. Awesome. Great. Okay, so I wanted to throw this out there. I'm sure a lot of the gynecologists who are listening are like, "Oh my god, I get this question all the time," but I ... and I think that we all probably know the answer, but I wanna hear your answer, and that is, "How often should a couple be having sex?"

Celeste: Aha! The biggest question of the day and definitely the most common question that I get. So I'm gonna, you know, kind of do the psychology on this one and say that when I hear that question, which I get a lot, the real underlying question, is am I okay? Is our relationship okay? Are we having enough sex? And then the underlying underlying question is ... give me a number so I can use it in a conversation. Right? So what I will say is, yes you can find statistics, you can find numbers, this is the average amount of sex that people have, blah blah blah. But if you do that, the first thing you're going to do is compare. You're gonna say, "Oh, I'm below that number. I'm above that number." You know? And we know that with most things in life, as with sex, comparison is the thief of joy.

Katrina: Yes. Right. I did a podcast all about that a little while ago.

Celeste: Yeah, very good. I love that. So it can really, when you are comparing your sex life with anybody else, it can really wreak havoc on your own sex life and your own relationship because you're basically trying to live up to somebody else's standards that aren't your own. Your sex life is as individual as your fingerprints. And so the answer is to figure out what works for the both of you to talk and do that. You know, I have couples who have a, b, c sex which anniversaries, birthday, Christmas but it works for them and it makes them feel connected and they feel connection and pleasure and that's fine. That's fine.

Katrina: And all the way to a lot more.

Celeste: All the way to the other, the other

Katrina: The other extreme, right.

Celeste: Which is great. Which is great. As long as it's working for the two of them. Good.

Katrina: Okay. Very good. You know what I think is also interesting about that too is you know you kind of want to know like am I normal? And who can really answer that question? Right?

Only you! Right? Like are you satisfied? Is this really what you want? You answer that question, you're the decider of that.

Celeste: Right.

Katrina: Yeah we definitely look outside of us. Right? It's kind of like when people are like, "How should I lose weight?" And it's like, well if you start thinking about it, you probably already know the answer like, stop eating at night, stop snacking all the time, right, stop eating off your kids plates, like there's lots of things that I think you already know.

Celeste: Right. Right. Right. Right. Like especially in sex, like normal's just a dial on your washing machine. And because we don't have very clear sexual education growing up, it's one of those things that we're really baffled about in general. We don't have good sex education. Like we do have pretty good nutrition education. We do have pretty ... There's a lot of it. That might be the other extreme example, but we don't really have great sex education growing up and so it is one of those areas that we have to catch up as adults and say, "Okay, what's going to work for me?"

Katrina: Right. Right. Absolutely. Well, and I feel like the sex education in health class and all of that, that's all about don't get pregnant, and like this is the biology of everything. Okay. Bye. That's pretty much it. There's not anything of like, this is how you have a loving intimate committed relationship, whatever it looks like. I mean, none of that's even discussed at all.

Celeste: No. No.

Katrina: I mean, at all.

Celeste: No and we can have, for sure, a whole semester on this, but yes our sex education consists of one, of reproductive model. So it's talking to us about how babies are made instead of how to connect sexually and how pleasure is made, so that's the one, the biggest fault we have and then we don't talk about, you know, we definitely live in a still puritanical country that tends to talk about things in more specific time terms instead of who and what is right for yourself. For sure.

Katrina: And yeah and then you know, throw in a whole set of religious beliefs possibly and a whole bunch of other things, and then there we go. Just everybody's shut down about it for sure. All right good. Okay so what I want to do is ask you just about a couple different things that I've noticed just over the course of time working with my clients, some trends that I hear of and that's why, this is the main reason I was so excited to bring you on because I think if I'm seeing it as a trend, then for sure, you know, then that's just the people who are working with me, then for sure there's gonna be a trend out there.

So when I first bring in a client into one of my groups I have them fill out an intake form where they kind of just answer a bunch of questions and get sort of more in touch with themselves and what's going on for them and many of them will say that one of the reasons they want to lose weight is because they want more intimacy with their spouses ... not spouses, their spouse, and they think that when they lose weight they'll want to have sex more often.

They think they'll feel better about themselves and then they'll wanna have sex more often. Now the what I teach is what determines your desire is your thinking, not what your body looks like, so that's available to you now. Otherwise you're going to get thin and go "Why do I still not wanna have sex?"

Celeste: Right.

Katrina: So I want you to speak to that and what your advice is to people who are going through something like that.

Celeste: Okay, great. That's a fantastic question and what I will say first is about attraction. So we think we are very visual creatures, and by some terms we are, because society kind of pushes that, but there's a large study in Marty Klein's book called, I think it's called Sexual Intelligence, yeah. And he did a study about how people are attracted to each other, like what people are attracted to about each other and this was like a study that was really generalizable across culture, across countries and the thing that attracts most people to another person is when they are independent of me.

So in other words, when I see my partner running a code, when I see him holding court, when I see her chopping wood out back, doing something that is independent of me. Right? Something that I couldn't think about doing that's not in my skillset, right? And so it's basically about making a gap in our relationship where we have two independent selves that draw to each other because of our independence. And that's kind of ethereal but it helps speak to the lesser importance of physicality as an attractive quality, if you will. If the way we look was a determination of our ability to get aroused then there would be a very small limited group of people who would actually have sex, so we can't put our sexuality on or our ability to get aroused based upon how we look. Now with that said, there are times in our lives where we feel more confident or less confident. But again, a lot of that doesn't have to do with the size of ourselves or the shape of ourselves.

Katrina: Right. Well for sure there are people who are very overweight who have fantastic sex lives.

Celeste: Yes! Exactly.

Katrina: So.

Celeste: Yes.

Katrina: So it doesn't have to be that. Yeah.

Celeste: No it doesn't have to be that at all. And to your point, what you said earlier, I like to say the biggest sex organ is your brain. So if you can get your brain there, the body will follow. The brain follows the body anywhere and so working on how you feel about sex, how you feel about yourself in your brain can help you get there with your body.

Katrina: And your body will follow. Okay. So. Okay. So let's kind of spin off of that. I've definitely had a number of clients who've found that they are in a significant dry spell when it comes to sex in their relationship. Usually a marriage. Usually they've been married for a number of decades. Kind of common threads are the kids are now kind of out of the house, or were down to just like the last one now at home and they're kind of, you know, they're leaving.

I think what it is really coming down to is the, you know my clients who are women are kind of like, "Oh boy, okay now it's really just gonna be us here soon. We haven't connected sexually in, you know, a long time, maybe six months or years, sometimes," and they want that kind of connection with their spouse, but they don't know how to get back into it. And they are very scared about bringing up the conversation and they, again, attach it to, I want that, but you know what I'm going to do, I'm just gonna lose weight and then maybe that'll help, right? So when you've had somebody or a couple going through really a long drought in that sense but they want to get reacquainted, reconnected, how do you walk people through that?

Celeste: Yeah, great question. So one of the first things that we always do in the practice is just like you do in intake form, where people are with their nutrition, whatever, I do a sexual awareness activity. So I have every couple that come in talk to me about where they are and where they want to go. So it's a really simple exercise and your listeners can do it, you know, tonight or right now or whatever, it's basically take a piece of paper and at the top you'll write "Sex is ..." and then you write just freeform all of the things that sex is for you right now. It's non-existence, it is, you know, you can use colors, it feels blue. It is soft. It's quiet. It's tender. You know, all of the things. And there might be some things that are in conflict with each other, but everything that you feel about your sex life right now.

And then another two minutes on the bottom half of your page write "My dream sexual experience would be" and then start writing what would it be. Would it be hanging from the chandeliers, panties on the ceiling fan or would it be just simply connected and authentic and true and all of those things. So when you know where you are and where you want to go, then you can start building the steps to get there. So that can be a really great first activity for couples who are ready to take that step back into their sexuality because we know our sexuality waxes and wanes as we go through life, you know, Ester Peril says, "Why does sex make babies and babies mean the end of sex?"

Katrina: Right.

Celeste: Yeah it's because ... and it truly is because of responsibility. Responsibility is the number one killer of arousal and certainly as physician moms, wives, whatever, you have a ton of responsibility, a ton of things on your plate. And when you have kids, there's nothing that feels more responsible than those little babies.

Katrina: Right.

Celeste: So just understanding where you are in the wax and wane of your sex life can really be helpful in opening that conversation and then start with things that feel comfortable for you.

Remember that sex isn't about penetration. Sex isn't about orgasm. Sex is about pleasure and connection so if you can reach those two things, you can be pleasure-centric and connection-centric in whatever activities then you're there. You are there.

Katrina: Mm-hmm (affirmative). I think that's actually a really good point because I think that I'm just kind of envisioning, I don't have like data to support this or you know someone specifically telling me but I'm thinking that, you know I have people who, a couple where they just are barely pecking each other on the cheek and that's their level of touch so maybe the next step is like, sit next to each other on the couch. Maybe hold hands. Like cuddle a little bit, like actually touch each other.

Celeste: Right.

Katrina: You know, get used to that. And then warm back up to it. Almost like you're dating again. Right, like you don't, most people don't just like "Hi, how are you?" Voom right into the sack, right? Like there's gonna be a warm up process, so it's almost like restarting that all over again.

Celeste: Yeah, it can feel really intimidating if you feel like you need jump back into you know, the first year you were dating or whatever, you don't. You don't. You're not those people anymore. It's okay. We have a lot of, "I wish things were like the way they were." Well, they're not.

Katrina: Right.

Celeste: They're different

Katrina: Like, stop looking to the past. What do you want to create now? Celeste: Exactly.

Katrina: Exactly. Love that. Okay. So then so many of my physician, my lady doctors as I call them, so many of them have, you know, issues with exhaustion, so you know, true physical fatigue, right? And for whatever reason. Lots of reasons that we don't have to get into. And they'll say, like "Oh and then my husband wanted to have sex and I was just so tired. Can't he tell I'm just so tired?" So for some people who are working on getting more rest and they're working on taking better care of themselves and balancing that, but they're not there yet, and they don't want to sacrifice their sexual relationship with their spouse or their partner at that time, during, while they're figuring it out. How do you get over the hump of I'm just so tired? You just make yourself do it? Like what, what do you recommend?

Celeste: Yeah. Yeah. So this is like way, way common, right? I, you know, I

Katrina: Any new mother, right? Like holy moly. Yes.

Celeste: Right. Exactly. I'm finally laying down on the bed and here comes the hand over you know, squeezing my butt or my boobs and I'm just like, "Ah no".

Katrina: Seriously? Right. Are you kidding me right now?



Celeste: Right, exactly, exactly. So I think what's important to know here is that there are two different types of arousal. One is spontaneous arousal where I feel aroused so I go seek out sex. And the other type is responsive arousal so I want to feel aroused so I seek out sexual behavior to feel aroused. So most of our society and most of what see on TV is an example, a pretty poor example, but an example of spontaneous arousal. I feel aroused, I go seek out sex. But I find that lots of people, and I won't segregate men and women, but lots of people are responsive, so once sexual behavior begins, then the arousal shows up, which is okay. It's totally okay. There's nothing wrong with that.

There's nothing wrong with that. But it can feel deflating if you never ... You're just never sitting at the baseball game and thinking, "Man, I really ... I could go for some sex right now." You could never feel that the rest of your life and still be a sexual creature and still be erotic and still have fulfilling sex so with the tired issue, one thing is, try and schedule it earlier. You know? When I talk about being intentional with our sex life, it has a lot to do with making it a priority like your dentist. I mean, those are things we don't miss. Like don't miss out on connecting with your partner. Like talk about it. "Hey, Thursday night I'll probably get home early. Like, why don't we put the kids to bed a little bit early and try and lay down a little bit earlier, so we can really enjoy some sex." There's nothing wrong your relationship if you need to schedule sex in. I highly recommend it. It can be very helpful 'cause it does two things. One it reduces anxiety about when sex is going to happen and it increases anticipation about the sex happening which can be very erotic. So you know that you're off the hook Monday through Wednesday. Right?

Katrina: Yeah.

Celeste: So that decreases anxiety and then on Thursday you can really show up in your authentic self and be ready for sex and then if you're a responsive arousal person, you'll know that you have the time to get into the mood, to cuddle, to talk, to connect, to be intimate, to let the arousal show up when it's ready to show up. Again, the body will follow the brain anywhere but we have to be conscious and intentional about where the brain is.

Katrina: Mm-hmm (affirmative). Okay. Yeah. Well and i think what's so good about that, you know it's like, I was telling my clients too it's like, if you're waiting to feel like planning your food, or like, you know, and "I planned my food then I didn't feel like eating what I made." Yeah. What you feel like is kind of irrelevant. You said you're going to eat it, so just eat it. Not in a sense that, where you're like pushing yourself to do something where you're totally uncomfortable, but you know, if you plan on having sex and you said you were gonna do it, I mean unless, you know, you really can't for some reason, then

Celeste: Well, at least give it a start.

Katrina: At least try, right. And also knowing that it doesn't have to end with orgasm, penetration, all of that stuff

Celeste: No.

Katrina: Being okay with what constitutes that was a good experience for us.

Celeste: Yes. Exactly, exactly. Give it a try. I am not about pushing through, you know just push through, just give him sex when he wants it, whatever. That breeds a lot of resentment.

Katrina: Yeah, yeah. I agree.

Celeste: So we're not doing pushing through but I do want you to, you know, give it a try, let ... knowing that your arousal may show up. It may show up after sexual behavior does.

Katrina: I think it's more just that your first thought is, "I don't feel like it." Okay then I'm not going to. Like, well hold on a second, like you know ... maybe but you did want that outcome so maybe it's worth you know just trying at least. Yeah, exactly.

Celeste: Right.

Katrina: So then the last question I had for you is kind of the mismatched sexual desire between partners. So I've definitely had some clients where they found that they feel like their level of desire's like pretty average, probably and then their partner's is very high. And then sometimes there's even a situation where they just, they've had a lot of sex, they feel like is a lot of sex and they say no. And then the partner doesn't take that well and then there might be some silent treatment or some emotional coldness or things like that and then it just ... they start feeling like they're being manipulated and then the resentfulness kind of comes, and it's like, so you're saying like if ... I am not even allowed to make a decision on this and then it really turns into a big thing, so how do you work through that?

Celeste: Yeah. So I'll start with this. Sex is very, very powerful. And we often don't give it as much credit as it is due. So sex can create life. It can break marriages apart. It can sell hamburgers. It can sell drano. You know if you've ever seen a double penetration drano commercial ...

Katrina: No, I haven't, but that's sounds horrible.

Celeste: Yeah. It's horrible. It's horrible. So sex is incredibly powerful so it can super fueled your relationship, or it can disintegrate your relationship, truly and it is the one thing that separates you, separates me and my husband from me and my girlfriends. So me and my girlfriend are really intimate. We chat a lot about all the different parts of my life but I have sex with my spouse. So it is the one delineating factor that you have that's just yours, so it can really breed a lot of negative things if you let it like what you were talking about, resentment or hurt feelings or feeling like you have been rejected when you make an advance.

All of those things bring a lot of power to the relationship, so that's why I feel like if a couple can work on their, where they are the most vulnerable, you're literally naked with somebody else. You're at your most organic state. If you can work on things there. If you can communicate there, you can communicate about the money and the parenting and all the other things. So if you have this sex life that works well for you, it kind of has a ripple effect to the rest of your life and the opposite is true too. So when you have couples that have differing desires as far as either what to do sexually or how much sex to have, which is by the way 99% of couples.

Katrina: Right.

Celeste: So there's very few people on this earth who just magically want to have sex the same way and the same amount all the time.

Katrina: Yeah. And they happen to get together.

Celeste: And they happen to find each other and get together. Right?

Katrina: Right right.

Celeste: So if that's your case, know that you're ... you know, it's common. I won't say normal. It's common but also it is a great opportunity for the two of you to just talk about and discuss what you want to feel. What you want to do. What does your dream sexual experience look like and what are the emotions that you can curate from that even if you don't have an orgasm or even if you don't have penetrative sex. Think about all of those sexual things or intimate things that you can do that provide connection and pleasure that maybe you feel more comfortable with sometimes and he or she feels more comfortable with sometimes.

So it's a conversation. It's a dialogue that matures as your relationship matures and it keeps coming up because your sex life is gonna change throughout the course of your life. So it's really important in my opinion that couples really talk about what sex is, which types of sex, what kind of sex, how much sex can super fuel their relationship at any time in their life.

Katrina: Yeah, I think what I think is so interesting is figuring out what the person who's upset is making the rejection mean, you know and what having sex means if it's really like this is the only time I ever feel close to you and connected to you and I want that every day ... maybe there's another way to have that same closeness and connection without it having to be through naked bodies and penetration so you still get that kind of connection. Of course it requires having somebody who's open to having these discussions. You know?

Celeste: Right.

Katrina: Some people are but it's interesting, like why is that so important? Then you look at another couple where they're like, "Yeah I mean whatever! Whatever you want. I could ... you know either way is okay."

Celeste: To do it or not do it. Yeah.

Katrina: What's different is just their thinking and what they believe, right, so. I think that's so fascinating to delve into that.

Celeste: One of the instruments that I use a lot is the Five Love Languages quiz and so we can really figure out how they're talking love to each other, and so if somebody's is physical touch, how can we meet that need if somebody else's is acts of service or whatever, how can we meet both of those needs sexually and non-sexually, so both people feel fulfilled because if both people are feeling fulfilled then sex becomes easier, because I don't feel like you're just taking all of my physicalness and not give me anything else.

Katrina: Right. Anything else. Yeah.

Celeste: We do use that a lot. I like that.

Katrina: Yeah, nice. Love that. Okay. Celeste, this has been amazing. So great. Thank you so much for coming on.

Celeste: Thank you Katrina!

Katrina: And I know everyone's going to love this. So you do work with people virtually. And you said in person too. I don't even know where you are like located.

Celeste: Yeah sure. I'm in Ft. Worth, Texas so I have an office here in Ft. Worth, Texas, but I do a considerable amount of online one on one coaching virtually via zoom and then I teach online courses, my biggest course right now is Elevate. It's basically a class where a woman, it's only for women, women can go through and really understand her sexuality and overcome some of those limiting barriers that she may have regarding sex like low libido, or sexual shame or you know painful intercourse or not being able to communicate well with your partner so that's one of my online courses that I feel like is a really great introduction and helpful piece for women who are just looking to have some sort of a roadmap to her own sexuality. Yeah, yeah, yeah.

Katrina: Right. It's like I know where I am, I know where I want to go. How do I get there?

Celeste: How do I get there?

Katrina: Yeah. And then they also can work with you one on one. So where can they go to find all this information?

Celeste: Sure, you can go to my website. It's [drcelesteholbrook.com](http://drcelesteholbrook.com). It's just Dr on the front [Ddrcelesteholbrook.com](http://Ddrcelesteholbrook.com) or you can email me at [info@drcelesteholbrook.com](mailto:info@drcelesteholbrook.com). And you can sign up for a free 30 minute discovery call session if you just wanna chit chat and talk about what's going on and see if anything that I can provide can help you or I may be able to recommend a book or some other course that may be a better fit for you. So definitely do get in touch. I'd love to chat with any of your listeners about what's going on in their life. How I may be able to help them live their best sex life.

Katrina: Yeah. Absolutely. And so we'll put the links to everything in the show notes and I just want to say Celeste is spelled the normal way and then it's H-O-L-B-R-O-O-K. Right?

Celeste: You got it.

Katrina: Doctor Celeste H-O-L-B-R-O-O-K.com

Celeste: Yep.

Katrina: You know with my name I'm [katrinaubellmd.com](http://katrinaubellmd.com), so it's like, I'm like, "How does that work?" It gets, so people can find it so great.

Celeste: Perfect. Thank you very much.

Katrina: Thank you so so so much. I know this is really going to help so many people.

Celeste: Oh, I really appreciate the opportunity. Thank you so much. I wish you all the best!

Katrina: Thank you!

Celeste: All right. Bye bye!

Katrina: Bye!