



WEIGHT LOSS FOR BUSY PHYSICIANS

— with Katrina Ubell, MD —

Katrina Ubell: Well, hey there, my friend. Welcome back to the podcast. I am really excited to bring you another weight loss success story. You guys have been loving these, eating these up. We get such great feedback on these. And this is actually the last one in the series. It was actually back in the fall that I recorded all of these success stories and decided to spread them out a little bit and here we are, end of March, finishing up the series. I had gotten lots of feedback, "hey, we'd love to hear more of those success stories," and I love doing them. They are super fun. I love showcasing my amazing physician clients who are doing the work and getting amazing results, and I know that it helps you to recognize what's possible for you as well. So, I love offering these.

Now, listen, you have to tell me if you would like more. I have more clients with amazing stories, so I am more than happy to find more people to showcase on the podcast. If you would like to hear more of these episodes, then feel free to go to the show notes page for this episode at KatrinaUbellMD.com/220, episode number for this one, and just let me know if you would like to hear more. I for sure will bring it back at some point, but maybe I'll give it a break, maybe I won't. I will see. You can let me know what you would like. They are so fun.

Okay. Now let me introduce my guest. Her name is Amanda Miles. She is amazing. She is a OB/GYN in a rural area. Rural is a hard word to say, isn't it? She does not live in the suburbs of the city. No, she doesn't. She lives in the country. She's adorable. She has the cutest accent, love it. I feel like I say this about all of my clients, but I love them so much.

And it's just so fun to see people just keep coming back and persevering just like what I teach you all, to just keep coming back, asking questions, trying to get clarity, trying to find out more about how they can solve their problems for themselves. She is just someone who keeps coming back, keeps asking questions. She's not afraid to get a little bit vulnerable if necessary so that she can actually move through what is holding her back and what she's struggling with so that she can just get through to the other side and create what she wants in her life.

So, she's going to tell you all about her success, all about her story. She's going to tell you all of the things. But she is just a delight, and I can't wait for you to delight in her as well. So, please enjoy my conversation with my weight loss success story, Amanda Miles, and I'll check back in and see you next week. Also, come and join me tomorrow. We'll hang out tomorrow, if you listen to this in real-time when it's going live. Enjoy Amanda.

Katrina Ubell: Amanda, thank you so much for coming on to the podcast today.

Amanda Miles: Thank you, Katrina. I'm so happy to be here.

Katrina Ubell: I am super excited to talk about your story, because I think that some of the things that have happened to you, especially on your path to finding all this work, I think, it's some stuff that people don't talk about but so many people have experienced, and I think that it's always best when we normalize and realize that everybody is going through the same thing. We're not the extra special broken person who needs to be embarrassed and needs to hide. With that said, why don't you give us a little introduction? Tell us about yourself.

Amanda Miles: Sure. Yeah. My name is Amanda Miles. I'm an MD, I'm an OB/GYN that practices in rural Oklahoma. And I joined WLDO or Weight Loss for Doctors Only to mainly address my emotional eating, and that's been kind of a lifelong issue for me. I think even as a kid I learned from an early age this Southern act of, if something bad happens, you make a casserole for someone and take it to them and then they feel better. So, food makes your bad feeling better.

Katrina Ubell: Right. Yes, exactly. Yes. It makes you feel better to feed other people, and you feel loved if you're being fed. Right?

Amanda Miles: Yes. Food is love. So, I think that that definitely was something I learned from an early age probably. And once I got into college and even into med school, I definitely tried to make my negative feelings better with food. I would definitely only study in places like Panera or coffee shops, not because of the coffee, but because of the pastries.

Katrina Ubell: Right. Right.

Amanda Miles: I would bring candy to study. I would use food to make myself feel better. And even then, I knew that I struggled with my weight off and on. I definitely struggled to maintain my weight for most of my college life and on. I was in Weight Watchers in college, and there was a set point where I wouldn't let myself go above, and then I'd go on Weight Watchers, count points, exercise a lot, and then get down below it again, and then go back to all my old ways. I was definitely one of the Weight Watchers people that banked my points so I could have something sweet or a little treat in the night. I used it

Katrina Ubell: Oh my god. That was the story of my life.

Amanda Miles: I definitely abused it. It never really worked to lose weight. It just helped me get to my weight that I felt was my top I would maintain.

And then once I got into medical school, the stress just increases. I think we all know that. I think that my eating habits definitely continued. I used food to cope with every stressor. I would always have little snacks in my pockets. You have the short white coat. People would have books and pens, and I would have sugar in one pocket. I would have snacks. It definitely continued. I learned in med school that ... I tried Atkins diet, and that actually helped to maintain my weight some. I learned that my body responded to being low carb, but it was just this yo-yo of doing low carb and dropping the weight and then going back to eating all the things that are carbs and sugar to make myself feel better, just back and forth, back and forth.

Once I got into residency, different stressors, but we definitely coped with food. And I think I was probably the main one that really encouraged that, looking back. We would do this thing called GI rounds where, after our morning check out, we would go tuck in all of our patients to make sure everybody was good and stable. And then we would meet for this code word. "We're going to go do our GI rounds." That's what we'd say in front of the nurses so it sounded kind of important, but we really meant just go to the cafeteria and eat biscuits and gravy or pancakes or whatever and have a breakfast.

We'd have snacks in the afternoon. We never missed a meal, I feel like. Then if something bad happened, we'd order food out just to try and make ourselves feel better, or at least I would, and I would encourage others to do that as well, of course. Just this continuing, I didn't want to feel any of this negative emotion. I just would be like, "Oh, it's okay. We'll go get some snacks and then we'll feel better."

Katrina Ubell: That's what you knew though, right? It's not like you were consciously like, "Ooh, there's a negative emotion. I don't want to feel it." You're just like, "This is what we do. This is how you live life."

Amanda Miles: Exactly. Yeah. That's totally how I live life. So, then I graduated. I went into private practice. I was actually basically a solo practitioner in a rural place, which I loved at the time, and it was a great job, but things got a little complicated. I had one kid in residency, and then we decided to try for one more, and I had twins unexpectedly. The pregnancy was very complicated. I had to be hospitalized, and my maternal fetal medicine doctor basically told me, "No more work. Immediately." So, I spent

Katrina Ubell: So, when you're a solo practitioner, what did you do? Did you have to find coverage?

Amanda Miles: Yeah. I was employed, but ... So, they kind of worked it out. My employers did. But it was very stressful to all my patients, because they had to drive an hour to deliver.

Katrina Ubell: Oh, wow.

Amanda Miles: I had all this guilt about that. It was literally like I had just spent 16 hours on my feet. I had some really long operations, and then the next morning I went to see the high-risk doc, and he's like, "You're not going back. I'm putting you in the hospital." And I had patients in the hospital

Katrina Ubell: Oh my gosh.

Amanda Miles: ... that I just did surgery on. I was making all these calls. It was crazy. So, life really stopped I think for me. And of course I felt terrible emotionally at this point, because I'd never taken any time off, a long gap like that. So, I basically spent three months sitting in a recliner

Katrina Ubell: Oh, really?

Amanda Miles: ... and this was whenever I really started listening to your podcast.

Katrina Ubell: Oh, okay.

Amanda Miles: I had it just on repeat. And I had little notebook. I was taking notes, because I knew I had to do something, because here I am pregnant with twins

Katrina Ubell: So, you're just home and literally, just ticking off the days til these babies are cooked?

Amanda Miles: Yeah.

Katrina Ubell: Okay. Okay.

Amanda Miles: Exactly. Exactly. And it was three months.

Katrina Ubell: Wow.

Amanda Miles: It was three full months of just sitting there in the recliner. I was allowed to move from the bed to the recliner and get up and get meals, and that was

Katrina Ubell: And you had a toddler then at that point. Right?

Amanda Miles: Yeah. Yeah.

Katrina Ubell: Oh my god.

Amanda Miles: And thankfully she was in day care and stuff.

Katrina Ubell: Okay. So, that wasn't ...

Amanda Miles: But it was really stressful.

Katrina Ubell: Okay. Yeah, it sounds like it.

Amanda Miles: We made it through that. I made it through that. We got some healthy twins out of it.

Katrina Ubell: Amazing.

Amanda Miles: Yeah, it really was. It was very amazing, and I'm so thankful. But then I'm nursing twins, and so that was kind of an excuse.

Katrina Ubell: No joke?

Amanda Miles: Yeah.

Katrina Ubell: Oh, sure. Yeah.

Amanda Miles: It was so stressful. You're right, yeah. But it was an excuse of like, "I could eat whatever I want in the name of milk supply."

Katrina Ubell: Yes.

Amanda Miles: So, all the negative feelings that had been building up for the last three months, I just ate them all. I would have my husband make a sandwich in the middle of the night, because I was like, "Sounds good. Let me have a ..." It was crazy. I just kind of kept on this whole eat, eat, eat all the feelings. Don't feel any of them. So, this all kept building. It seemed like the negative habits of just feeding my feelings instead just kept building and building. After the twins, I was super burnt out after I went back to work. I

Katrina Ubell: So, same job. Back to being on your own.

Amanda Miles: Same job.

Katrina Ubell: Okay.

Amanda Miles: Yes.

Katrina Ubell: With twins at home.

Amanda Miles: With twins at home.

Katrina Ubell: And busy OB practice, right? So, you're delivering people

Amanda Miles: Yeah.

Katrina Ubell: Were you taking call all of the time?

Amanda Miles: Yeah. Yeah. I got Wednesday nights off and then two weekends a month typically off.

Katrina Ubell: Okay. But that's still ... That's a lot.

Amanda Miles: So, it wasn't very many nights ... it was a lot.

Katrina Ubell: Totally.

Amanda Miles: Yeah. Yeah. So, it wasn't a great setup, but it was also a really small town. So, whenever I was on call, it didn't mean I would get called every night.

Katrina Ubell: Yeah. Sure.

Amanda Miles: But I was up every two or three hours with the twins. So, I mean, I was up. You know?

Katrina Ubell: Yes. Right.

Amanda Miles: It was a rough time in life. So, the job, I became really burnt out. I was not happy being an OB/GYN anymore. And a lot of it, yeah, was the home stuff, but a lot of it was just my thoughts about work and the story that I had been telling myself of how they treated me whenever I was on bedrest and how they treated me whenever I came back. I had this kind of dramatic

Katrina Ubell: Can you share some of that? Because I think sometimes, when we hear what other people are thinking, we're like, "Oh my gosh. Yep. I've had those thoughts too." What did you think about it? What was the story you told yourself about it? What happened?

Amanda Miles: Yeah. Of course the day that I went on bedrest, it was I'm making calls and I'm trying to figure out who's going to see my patients in the hospital to send them home. I want to say it ended up being like one of my buddies that's an internal medicine pediatrician saw one of my patients just to send her home. And maybe a general surgeon went and saw someone. Just small town goodness

Katrina Ubell: All hands on deck kind of. We've got to help her out.

Amanda Miles: Yeah. Exactly. Which was great. But then it was kind of this attitude that I had towards admin or the administration of my job, that they weren't doing anything right. They were making my patients drive an hour. I had this story of how they responded to me going on bedrest. Obviously they didn't care about me. I'm just a cog in the wheel. I'm just here to make money for them. As soon as I can't make money for them, I mean nothing to them. So, that was a big thought actually I had that I really struggled with for a long time, was that I'm just a money-maker for them. And whenever I'm not of value to them, my existence is not worth anything to them or to myself.

Katrina Ubell: Right.

Amanda Miles: That was a big part of it too. I had valued myself on I work hard, I produce a lot, I handle this. I'm the small town doc. I do it all. And then all of a sudden I wasn't that, and I really had to figure out where my self-worth was. And honestly I don't think I did that until I was in WLDO, and that's two years later, because this story stuck with me since then.

Katrina Ubell: Well, and it explains why you struggled so much. Right?

Amanda Miles: So, there was a lot

Katrina Ubell: Because you tell yourself this story so much.

Amanda Miles: Yes.

Katrina Ubell: You know what I mean? That you start believing it like it's true. And I know this to be the case. I resonate with a lot of what you're saying. And then before you know it, you're like, "This is what they believe about me," and you think that it's as though they have told you that or you read something that said it, even though literally your brain just made it up. That's so powerful.

Amanda Miles: Yeah. Yeah. 100%. Yeah. And looking back, the sleep deprivation probably didn't help the negative mind drama, but it's like, once it was there, it stuck, and there was nothing anybody could do probably to get ... Nobody else could do anything to get me out of that. And I didn't have any coping mechanisms to see

Katrina Ubell: And you thought everyone else was to blame.

Amanda Miles: ... that that was even coming from my own brain. Oh yeah. Yeah, yeah, yeah, yeah. 100%. It's just this administration. It's the CEO. It's the bigger part of the company I work for that's over in the big city. 100%. They were the villain, and I was the victim, and that was huge. That was huge. So, after a few months back at work, I got back into practicing OB and being up all night. And there were some changes in the hospital where I had been working that probably weren't ideal, meaning nurse staffing and just administrative stuff that happens in hospitals. And I kind of hit a limit there, and I kind of rather quickly quit my job and took another job that had been recruiting me months prior, and I'd said, "No, I'm not interested in a new job. I've got my dream job." So, kind of fairly quickly, I boiled over almost with emotions of being fed up and being burnt out, and it's kind of like all these emotions I've been tamping down kind of exploded or boiled over.

So, I quit my job, and I took a new job. You take a new job, and you think, "Oh, the grass is greener. Everything's better. It's going to be perfect. I've got partners now. I have less call. It's going to be so great." And it was, I think, but at the same time all the thoughts that I was having about work and the everyday business as an OB/GYN followed me, because I never worked on them. I just took them with me to my new job. So, a year into my new job, I was feeling burnt out still. And I'm like, "Why? Why is this like this? What's the point of all this?"

A year into my new job, I found myself in Dallas, like many OB/GYNs do for their oral boards, and I kind of had another tipping point. I had just completed my oral boards, and I went back to the hotel. They drop you back off at this hotel. And I was so stressed and so overwhelmed that I ate everything in the hotel room.

Katrina Ubell: Out of the mini bar, all the snacks and stuff that they have?

Amanda Miles: Yeah. Yeah. Yeah, I don't know how much that cost me. It probably cost me a lot of money.

Katrina Ubell: Like 150 bucks in cashews.

Amanda Miles: Probably. Yeah. Exactly. And I had gone to a Walgreens or somewhere and loaded up before, because that's what I do whenever I study. Right? I had all these snacks already everywhere. I had been snacking on them for three days.

So, I ate it all, all at once, and I basically found myself questioning life from the floor of a hotel bathroom, laying there, super sick. I've never been to that point where I ate so much that I was sick. And just thinking to myself, Katrina, that this is what drug users do. This is what a heroin addict does. They use and use and use, and then they find themselves laying in a hotel bathroom.

Katrina Ubell: Right. The irony was not lost on you, right?

Amanda Miles: No. And it's not like I'm a ... I'm not a food addict. I don't identify as that. It's just that I don't have any coping mechanisms, just like a drug user. My brain likes the dopamine that does come from food. And I had zero coping mechanisms. So, there I was. That was about six weeks before I started WLDO. I had already signed up, because I knew that I needed something to address things. And I said, "I'm going to sign up for WLDO as a reward for getting through my oral boards." Six weeks before, I find myself in this hotel, just at rock bottom. So, at that

Katrina Ubell: That's so fascinating. Right? So, you already knew I need this help, and then it was just like ... Isn't that so cool though that you weren't like, "Oh my gosh, and now I've got to figure out what to do." You're like, "Well, if there ever was more evidence that I need to do that, I guess here we are."

Amanda Miles: Exactly. Yeah. It was crazy. I haven't told very many people about that. I'm telling you about this and now I guess the world, but

Katrina Ubell: But this is what I'm talking about, this idea. You're not the only person who's ever, out of stress and anxiety and overwhelm and all of that, just binged to the point of feeling physically ill. I mean, it's just like this is what happens to people when they are pushed so far without any skills to deal with it. That's all you're describing. It's not like something's wrong with you or there's something to be embarrassed about. It's just this is just what ends up happening when you train a bunch of doctors, and they're in a very stressful environment, and they aren't given any kind of help whatsoever otherwise to deal with life.

Amanda Miles: Yeah. 100%. Looking back, honestly, I don't know how I maintained my weight like I did. I'm really actually surprised, which I mean, I guess I'm thankful for that. So, basically at that point, I knew I had to make a change. I was sitting at I think 155 pounds at that point. And I'm kind of short. I'm 5'3". I don't know if that's

Katrina Ubell: No, that's helpful, because that weight's great if you're a lot taller.

Amanda Miles: Yeah, exactly.

Katrina Ubell: Give the people some perspective. Yeah. Yeah.

Amanda Miles: 155 pounds if you're six foot is like nothing. So, I'm 5'3". So, on me, that was a lot of weight, and that was my highest weight ever. And I could feel it in my joints, my knees, my hips. I knew I had to do something. Whenever you enroll for WLDO, there's a list of things to start studying or doing, and I listened to The Obesity Code, I guess is what I did. I listened to it in the truck on my way to work, and I started getting rid of flour and sugar. So, I lost probably 15 pounds leading up to WLDO, the six weeks leading up to

Katrina Ubell: Wow.

Amanda Miles: ... just doing what I knew you were going to probably tell us ...

Katrina Ubell: You were like, "I mean business." Yeah, right.

Amanda Miles: Yeah. Yeah. I was like a changed woman.

Katrina Ubell: Not messing around.

Amanda Miles: I was like, "This is it." I had a revelation. Yeah.

Katrina Ubell: We're not repeating that hotel room floor, bathroom floor episode again.

Amanda Miles: Right? Yes. Yeah. We're not going there. So, the only way to go is up. Once I started WLDO, the food part was pretty easy for me, because my body responds to no flour, no sugar. So, I really quickly dropped another

Katrina Ubell: Which can we just pause for one second to just say that people often think that that means super low carb or keto? And that is not what we're talking about.

Amanda Miles: Yeah. It is not. No.

Katrina Ubell: You can totally eat carbohydrates. You're just not eating them in the form of flour and sugar. So, I just want to be clear about that, because that's a common misconception. I'm always like, "Listen, I ate so much rice and potatoes when I lost weight." If that's something you want to do, you can do that, if you like that; but that's not what we're necessary saying. Okay. Please continue.

Amanda Miles: Totally. And way more carbs than I ever had on Atkins, I mean way ... If you're going to count.

Katrina Ubell: Yeah, yeah. Of course.

Amanda Miles: Not that I counted, but ... Just getting rid of the things that really peaked the dopamine in my brain. So, I dropped another 15 pretty quickly in the first few months of WLDO, and then it took me several months probably before one of your coaches kind of called me out on why I hadn't reached my goal weight. I had only been five pounds from goal weight. And she said, "Well, obviously you're still using food to buffer your emotions or cover up your emotions." And just getting kind of called out, it was like, "Oh yeah, I guess I am."

Katrina Ubell: Yeah. Right?

Amanda Miles: So, just kind of calling out myself again and really working on feeling my feelings instead of pushing them down. I actually would schedule time on my calendar. Like today, right as soon as I get home, for five minutes, you set a timer, and you're going to feel your feelings on purpose from the day. And if they're good or if they're bad, whatever.

You're just going to practice feeling them and acknowledging them. So, after that, after I really worked on feeling my feelings, I very quickly dropped the last five pounds.

Katrina Ubell: You talk about that though like it was just so easy. "Oh, and then I just decided to feel my feelings, and then I got to goal weight."

Amanda Miles: No. Right.

Katrina Ubell: So, let's just talk about that.

Amanda Miles: No.

Katrina Ubell: Let's just unpack that a little bit.

Amanda Miles: Yeah, let's.

Katrina Ubell: What was your experience of feeling feelings up until that point? Were you anxious about it? Were you afraid? Did you feel confused on what to do?

Amanda Miles: Yeah. I was very afraid to feel any feelings. I had been doing the work and the modules, which make you acknowledge your feelings, but actually sitting and processing an emotion in a way where I'm feeling it in my body and I'm going to that place ... So, I would actually practice by thinking about all of the bad things, like worse case scenario things, and that I'm scared of or whatever. I don't even know how to describe it. Practicing thinking about something really bad to trigger that emotion and just sit with it and know that, look, I survived. I'm okay. I did it.

Katrina Ubell: And the point of that is to build up that confidence that I can feel these emotions so, when they do come up organically, you're not just hitting the easy button immediately, which is that habit that you've had for so long of "I just have to eat something, because now is not the time to be learning how to feel this." Right? It's like you're becoming an expert in feeling the emotion sort of ahead of time.

I do have to say that I've often thought ... I mean, there are ups and downs with every medical specialty, for sure. I think some maybe a bit more than others. I think there's more ups and downs, like I said, in some more than others. And I would say that OB/GYN is one of the ones where I think there's a lot of compartmentalization of emotions that you have to do, which is important. You have to be able to do it, or you will have trouble maintaining a professional demeanor and relationship with your patients. But there's a lot of really sad and not desirable things that happen when you're taking care of women and unborn babies. Learning how to stuff that is important, to be able to keep moving on, but then, then ... This is the part they don't teach you, right? How to actually process that. You can't just keep stuffing that forever.

Amanda Miles: No. And that is

Katrina Ubell: I mean, I know so many of you guys have just talked about these horrific stories of terrible things that happen, and not everybody goes through all of them, but things like it's burned in your brain, like you will never forget that. It's literally like a trauma, and then no support on the other end on how to deal with that. Did you spend some time working on things like that too?

Amanda Miles: Yes. And whenever I say I scheduled time to feel my feelings, I actually had several cases that had been with me for a long time that I went back and thought about on purpose to really process that grief. Look at me. I'm feeling some emotions right now. I'm good at it now.

Katrina Ubell: Yeah, you are!

Amanda Miles: But thinking about it

Katrina Ubell: You're so good at it!

Amanda Miles: Yeah. Hey, it's okay. It's just tears in my eyes.

Katrina Ubell: It's so good. Yeah.

Amanda Miles: I'm okay with it. I went to those places. I would pull into my house and, before I'd go in, I would set the timer for five minutes, and I'd think about a mom who lost a baby or a terrible, traumatic event as a surgeon, or just complications we have. Whenever it's bad, it's really bad. And just processing my grief. Like you said in all your podcasts about grief, it finds you. It waits for you. So, I took some time to really process some of those really big cases like that, and I cried. I'd just sit in my truck and cry and feel it and then allow my body to process it instead of keeping it stuffed down inside. Yeah, that's so

Katrina Ubell: I was just listening to this podcast where people were talking about how emotions have a beginning, middle, and end. And what we try to do is we try to halt it in the middle and think that that's okay and there won't be any repercussions from that, and it really isn't. There's things that you can do to end it, to complete that circle so it's processed and done. And it is kind of like a big ask. Right?

You're like, "Okay, I've ..." Not forgotten, but you know what I mean? I'm not actively thinking about the thing that's really painful to feel right now. And now I'm going to ask myself to go to that place, feel bad, cry, whatever, or for some people it's rage and anger, to get to that place. Some people feel like, if I go there, I'm going to be out of control. You have to have some buy-in on I can't skip this part, and I think that's what you had, where you were like, "Okay, I see that this is the part I haven't done. And if I really want to get to my goal weight, I've got to figure this out," and then that's exactly what happened. Right?

Amanda Miles: Yeah.

Katrina Ubell: And it's not like, oh, you learn how to feel your emotions, and then magically you eat differently. I mean, also, you may not overeat a little bit. I swear, as protection, our bodies will hang onto the fat. Right? We're in this state of emotional threat at all times, because we won't process it all. When you learned how to close that loop and let it all off, the body's like, "Okay, I'm safe now. I don't need this. I don't need this anymore, this extra fat."

Amanda Miles: Yeah. None of the high-stress, running back to the cage to save myself mindset.

Katrina Ubell: Right. Totally.

Amanda Miles: And I think that's key. And really focusing on setting myself up for success for that. Whenever I was doing that, I would kind of give myself a pep talk like, "Look, I'm at my house. I'm sitting in the driveway. We're going to do this for five minutes, and then you get to go in and play with your kids. Nothing bad has happened right now. It's all good. Nothing bad is happening. So, let's go there. Let's dig in."

Katrina Ubell: You're safe to feel this. Yeah. Yeah. That's so good, so good. Did you have days where you were like, "You know what? Not today. I'll just do it tomorrow"? Did you have days like that?

Amanda Miles: Yeah, of course.

Katrina Ubell: I know I would.

Amanda Miles: I think we all do. Yeah.

Katrina Ubell: I would totally be like, "Wait, now it's been a week. I haven't done it."

Amanda Miles: Yeah. Or I'd pick something that wasn't hard for me to feel, and I'd

Katrina Ubell: Which is totally okay. It doesn't have to be so hard and intense every single time.

Amanda Miles: Yeah. No. Today I'm going to practice feeling what anxiety feels like in my body, instead of grief or fear or overwhelm or shame. Shame was a big one for me.

Katrina Ubell: So, then as you were doing all of this work, because burnout had been such an issue ... Right? So, you're working on your brain, you're working on your body, but at the same time working on your whole perspective and experience of your new now job where you have the support and you take less call and all of that.

Amanda Miles: Yes.

Katrina Ubell: So, let's talk about that some.

Amanda Miles: Yeah. I really had to I guess kind of retrain my brain on how to think about work, honestly. I was in this new place. Things were completely different. And I was still having the same burnout stuff where I was emotionally exhausted, and I was kind of frustrated with patients and questioning why am I doing this, what's the point. It's all because of everything that I just brought with me, all my thoughts.

So, really I think getting it down to the nitty gritty of what ... I think someone, I don't know if it was you or if it was one of your other coaches, that had me make a list of where I could find the fun in my job. Where can you find the fun again? You used to like this. You used to love your job. How can you find the fun? And trying to really focus on the good. I know that sounds very "oh, I just found the good in it," but

Katrina Ubell: Sounds simplistic. Right. But it sounds like it was really hard.

Amanda Miles: It sounds very easy, but it's hard.

Katrina Ubell: Right. Yeah. When your brain is like, "You're so good here," you've got to really start searching.

Amanda Miles: Yeah. And it started off with little stuff like, "Well, I have a parking spot that's assigned to me," silly stuff that I would just make a list. I would just make a list and try and focus on something small and then really, really trying to figure out what parts of my job were a story and what was actually real, because my brain is real good at the drama, the negative drama of "everything sucks and it's not okay, and this isn't how it should be." So, really examining is that true. So, just really working on some of that. And I was very big into blaming others for my issues. My mindset is "well, it's because they're doing this," or that kind of thing. So, I had to work a lot on taking responsibility of my own thoughts and my own emotions, and that took a lot of work.

Katrina Ubell: I mean, that might have been just kind of maybe more of an easier tendency for you just baseline. But when I think about being a medical student and even being on a team where people were in general ... It was pretty fun. I mean, it's not like I remember it as ... There were some where it was like, woo, that was toxic, and everyone was in a really bad place.

Amanda Miles: Yeah. True.

Katrina Ubell: Not even that. But just the way that we learn to think about what we do and what's done. Right? That the ER is punishing us or just things like that. Right? It's so filled with blame and not taking any kind of ownership for your experience at all. Your brain was just, either it was trained to do that or it's just further reinforcing for you this is what we do. Just anything bad that's happening, it's certainly because of some other person's ... It's some other person's fault. And even amongst doctors. Right? Blaming the nurses or blaming whatever ancillary staff or lab doesn't come up fast enough or whatever it is. Right? Radiology is late today or whatever it is. It's like, there's always this idea that it's someone else's fault, we can't possibly be the ones who have the problem, and that's just how your brain will filter everything. Right?

Amanda Miles: Oh yeah.

Katrina Ubell: It won't be like, "Oh, but in this case actually, I think it might be you." That's not going to come without some actual effort to look for that.

Amanda Miles: Yeah. A big thing in ... Whenever I joined the new practice, a word that was kind of tossed around a lot, not just by me but by some of the other group members, was "oh, well, so-and-so doc dumped this one me." That was kind of the attitude of getting a dump or someone is dumping something on you.

Katrina Ubell: Totally.

Amanda Miles: So, it definitely

Katrina Ubell: Or some crap consult or something like that. Right?

Amanda Miles: Yeah. Yeah.

Katrina Ubell: Always being upset that so-and-so is doing what they shouldn't be doing or they're not taking responsibility for their patients or things like that. Yeah.

Amanda Miles: Yeah. Yeah. And being really judgy about how other people practice.

Katrina Ubell: Totally. Totally. So, did you just really gradually unravel that, or were you just totally working on awareness of there's another one, there's another one?

Amanda Miles: Yeah. Early on in WLDO, I committed to, every time I was on call, this is what I was going to focus on, because part of my burnout too was that I was so miserable whenever I was on call. I hated it. I had felt so sorry for myself for being on call. So, whenever I was on call, which is about once a week and then one weekend probably every month or every other month, I would just solely, if I had any free time, dedicate it to working on specifically my job. So, I would start with ... I worked on the relationship that I have between me and my staff, me and my other doctors, me and my patients was also a big one, and evaluating whether I'm showing up how I want to be. Am I the doctor that I want to be? So, defining what's a good doctor. Am I being that person? And also kind of defining what practicing medicine, what a good doctor does, how they practice good medicine. We always think, "Oh, well, they're not a good doctor," but whenever we define what is a good doctor, it doesn't include the details of, well, they don't give me a consult, or something. They don't

Katrina Ubell: Right. Right.

Amanda Miles: That's not part of it. We can all be good doctors and support each other without having to cut each other down or judge each other.

Katrina Ubell: Well, we can give each other the benefit of the doubt. Right?

Amanda Miles: Yes.

Katrina Ubell: Like, this person's giving me this consult at 5:02 on a Friday because they legitimately need help.

Amanda Miles: Exactly.

Katrina Ubell: This patient's going to be in better hands with me over the weekend than with them, or something like that. And it's just not natural, and it's not part of the culture. You don't see very many other doctors being the role model of that viewpoint. They might just take it and not complain. I'm sure there are people who totally have that viewpoint, but they aren't outwardly going, "You know what? No sense in getting upset about this. I'll happily take it on at 5:00."

Amanda Miles: Exactly.

Katrina Ubell: That's not what you're seeing. So, it really is. It's kind of like you're swimming upstream. Right? The current is like, "No, let's just be mad about this. Let's just all complain and sit together and eat cake while we complain or cookies or candy or whatever's in the nurse's station."

Amanda Miles: Yes. Exactly.

Katrina Ubell: And you're going, "No, actually, I'm not going to do that. I've got to think of a whole new perspective, a whole new story around this."

Amanda Miles: Yeah. Yeah. That's exactly right.

Katrina Ubell: So, what's your experience now of working, having done that?

Amanda Miles: My experience is much better. I love my job again. I'm excited to go deliver babies again. For a long time, I was not. I enjoy working with all of my partners, and that was something that I really had to work on too. I came into this group as kind of an outsider and joined this group and kind of had an attitude of I don't fit in and that kind of stuff. So, working on that. Yeah. Giving everybody the benefit of the doubt and just knowing that we're all doing the best we can. And I don't hate call anymore. I actually look forward to weekend call.

Katrina Ubell: Wait, I'm sorry. Come again? What was that?

Amanda Miles: I know! Say it louder for those in the back. I don't hate call. I'm excited about it usually. The weekend call, I have a little ... This sounds weird, but I have a little tote that is my call box. So, I have little projects. I'm kind of an arts and crafts geek, I guess. So, I'm into some scrap-booking and little art projects and stuff like that. That's my call box. I only get to do those fun things whenever I'm on call. And I always have a book in there. I always have some special body wash. Just little creature comforts that I look forward to doing those things whenever I'm on call. And that way I'm not sitting there just binging Netflix for 72 hours on the weekend and eating snacks and feeling sorry for myself.

Katrina Ubell: Well, and that is self-care right there. Right?

Amanda Miles: It changed my life.

Katrina Ubell: Yeah. It's respecting yourself enough and loving yourself so much that you're like, "Yeah, is this my first choice of what to do? No." I'm sure, given the option, you'd be like, "I'll never take call." But if I have to take call

Amanda Miles: Exactly.

Katrina Ubell: ... I can totally make it a good experience for myself. Right? It's just like, I get to do these fun things, and I get to treat myself really nice, and it's actually a really nice experience for me, because you've decided to create that experience for yourself. That box doesn't just get made. It doesn't get dropped off on your doorstep just like, "Here you go. Here's how you have fun on call, or have a nice time on call." Right?

Amanda Miles: Exactly.

Katrina Ubell: You've got to figure that out for yourself. You've got to try out different things and see what's going to work.

Amanda Miles: And it took a long time to figure out that I could have a good time on call, I could think about it as, hey, look, we're going to make some money tonight.

Katrina Ubell: Right.

Amanda Miles: I've got three people in labor.

Katrina Ubell: There's nothing wrong with that. Yeah. Right.

Amanda Miles: No. It's kind of exciting. So, just changing some of that mindset of where's the fun and finding that, and also taking better care of myself as far as sleep goes too on call. I try and make it a point to really try and force myself or do some meditation or something before bed to get myself sleepy to go to bed early whenever I'm on call. So, I'll be trying to go to bed at like 8:00 or 9:00 usually, because I know I'm going to get called and be up. So, just making that kind of priority number one has been a game changer as well.

Katrina Ubell: Yeah. Then even if you get three or four hours, until you are up the rest of the night, at least you have ... That makes it so you have less recovery afterward. Right?

Amanda Miles: Yeah.

Katrina Ubell: It's less of a hit to you. You can bounce back faster and quicker. Amazing.

Amanda Miles: And I'm so much more likely to have a better outlook if I have sleep, because, before, I would just sit up there and just binge watch something on Netflix. I'd stay up late, knowing that I'm probably going to get called around midnight. And then the calls start coming in, and I haven't gotten any sleep, and I've literally been up all night.

Katrina Ubell: Yeah. Right, right, right. Exactly. Exactly.

Amanda Miles: So, it's just a vicious cycle.

Katrina Ubell: I don't think it has to get harder as you get older, but I think that's the experience that a lot of people have, that just their bodies are less agreeable about skipping a whole night's sleep every however many days. That's incredible.

Amanda Miles: It takes longer to recover with each year.

Katrina Ubell: Right. Right. Right. Exactly. Exactly. So, how about at home too? I know you did a ton of work on all of that. What can you share about that experience?

Amanda Miles: Yeah. So, a lot of my work at home, I did a lot of work early on with my relationships with my kids. After I think the complicated twin pregnancy and all of the drama that went into that ... And then the first year of having twins is not fun. I don't tell anybody that it's a good time, that's for sure.

Katrina Ubell: The only thing that's worse is having triplets. That's what I have to say about that.

Amanda Miles: Exactly. At least I have two hands and two boobs. Sorry. It definitely was not a great relationship honestly. I struggled to feel connected and feel like I was being a good mom. And of course I think a lot of us suffer from mom guilt. I don't know if that's a standard issue.

Katrina Ubell: Oh, I think a standard issue. Well, because I think we have just been socialized and grown up with this idea that we must be doing something wrong. Right? There's something wrong with us, something wrong with our bodies. We're not smart enough. We're not something enough. So, it's logical that we become mothers, and then we're like, "Well, certainly I'm doing a crap job at this as well, and then let me show myself all the ways."

Amanda Miles: Exactly. Exactly. 100%. And that the struggle that I found myself was I can't be a good mom and a good doctor at the same time, was kind of

Katrina Ubell: Yeah. So many people struggle with that. Yeah. If I'm at work, I'm doing a bad job at home; when I'm at home, I'm not a good doctor. Yeah. Yeah.

Amanda Miles: So, that was a big one.

Katrina Ubell: Tell us how you worked through that.

Amanda Miles: Well, yeah. I think just going back to ... I think I had a coaching call with you where you had me define what's a good mom and going back to the

Katrina Ubell: I remember that.

Amanda Miles: Just breaking it down. What's a good mom? What's a good doctor? And it's very basic. Making a very basic definition allows yourself to fit into both definitions, allowing yourself to be both.

Katrina Ubell: Exactly. When we're like, "I'm doing a bad job," what we're saying is "I should be able to do both jobs in 24 hours a day as well as someone who devotes their full 24 hours a day to each one." Right? All they have is doctoring, and all they have is being at home, and we should be doing both well enough. Then we should be happy about it on top of that. I remember just being like, "Okay." People would be like, "Oh, well, you have this day off." I'm like, "Well, right, but I'm also running an entire household during that time, and I've got kids at home. I don't even have childcare on my day off." So, I'm trying to do all of this, trying to have fun with the kids, trying to do an arts and crafts project and, when it was a mess, being so bad that I had to mess to clean up. It was so hard. So, I think what it is is, once again, it's like that story that we tell ourselves

Amanda Miles: It is.

Katrina Ubell: ... of this is quote/unquote a good mom way, whatever, that things should be done, and then just this is just the story that we tell. Like, see? If I were a better mom, I'd be doing these other things. And I think it's also sometimes the way we relate with one another. Right? It's just how self-deprecating we can be, but also mom of the year award over here. I just did this crap thing or missed whatever. We kind of do that as a way to try to connect with one another, but it again perpetuates that thinking of I'm not enough, I'm falling down on the job, my kids deserve to have someone better than me, and my patients deserve to have someone better than me, and it just makes us feel like total crap the whole time. So, when we really do that work like you were describing, what do I think a good mom does? Let's just get really clear. What does that even mean? What don't even know what we're saying when we're saying it, and then we figure it out, and we're like, "Well, if we get to just define it because there's no good mom police out there, then why not define it in a way that makes it so that we can fit in to that definition?" Right?

Amanda Miles: Exactly.

Katrina Ubell: It doesn't help you to be a better mom to feel bad about how you are as a mother.

Amanda Miles: Yes.

Katrina Ubell: You aren't doing a better job when you think that way.

Amanda Miles: No. It doesn't serve you at all, at all.

Katrina Ubell: No. No. No. So, you did all of that, and you looked at it, and you were like, "Okay, this is the new way I'm thinking about it."

Amanda Miles: Yeah. It took time. It took time to feel like I had a balance between good doc and good mom. I think really just allowing myself to know that being present and doing the best I can with what I have, in either the doctor hat or the mom hat, is what is good. So, just defining that and allowing myself to be good as I am.

Katrina Ubell: Yeah. Ah, that's so good, so good. So, what other takeaways? I mean, first of all, what'd you say? You weigh less than you did on your wedding day when you were working out two hours a day?

Amanda Miles: Oh, yeah, totally. I went from 155 to 120, and then that's at least five or six pounds lower than whenever I got married. And I got married really young. So, I think I was 19 or 20. I'd have to count.

Katrina Ubell: Were you really? Oh my gosh.

Amanda Miles: Yeah. I married my high school sweetheart while I was in college. So, that was probably one of my skinniest times. I haven't weighed this weight since I was probably 16, honestly.

Katrina Ubell: Wow. Wow.

Amanda Miles: That part's great. The maintaining is a little harder than I think most people think it'll be. But it's a learning process of its own.

Katrina Ubell: Because we really just think that then we're just going to be coasting. You know?

Amanda Miles: Yeah. Then it's just done.

Katrina Ubell: I know.

Amanda Miles: And that's not true.

Katrina Ubell: But there is sorting out of yourself and maintenance. Right? There's just figuring out what is ... If I'm not getting all of this positive reinforcement from the scale, then why do I keep doing this, and how do I stay consistent with that? And then just knowing, too, that your body's going to change or certain things are going to whatever. Maybe what felt good to you or a certain way of eating was great, and it's not feeling that way anymore, and you've got to be willing to shift it up, mix it up. I was just talking to a friend, and she was saying ... She's like, "I just don't want to have to think about food," and I was like, "No, but here's the thing though. It's not that you don't want to have to think about food. You want to not have chatter around food. You don't want to have your thoughts consumed around food." But I was telling her. I was like, "I don't think that there's any woman who's 40 and up who has a normal weight, who doesn't at least think about it." Right? Those days are over once you're that age, where you're just like, "Whatever."

Amanda Miles: Exactly.

Katrina Ubell: Whatever comes under your nose, just eat it. No big deal. And I think coming to terms with this is something I'm going to have to pay attention to, ongoing, but I don't have to let it become something that takes me over and is all consuming or something that takes up more brain space than I want it to. I think that's the difference and finding that nuanced place for yourself.

Amanda Miles: Exactly. I mean, planning my food and the amount of energy I have to put into it is kind of like brushing my teeth.

Katrina Ubell: Right. Right.

Amanda Miles: It's just part of your day. I don't put any drama into it. It's just something I do.

Katrina Ubell: I love it.

Amanda Miles: It's a little different.

Katrina Ubell: That's so, so good. So, we could say that doing this work has changed your life. Right?

Amanda Miles: Oh, every aspect of it. I can't even. I thought, "Oh, well, I just need to work on this emotional eating." I knew that that was an issue, and it was a big issue. It was. But probably the effects it had on the rest of my life was way more than the emotional eating. I mean, giving myself the tools to deal with my emotions was really key, I think, and it changed all aspects of my life, all aspects 100%. Yeah, it's been amazing.

Katrina Ubell: That's so cool.

Amanda Miles: Totally worth the money.

Katrina Ubell: Totally worth it. Right? Because you know what's funny? It's like, how can you even put a dollar figure on total life satisfaction and fulfillment? You know what I mean? It's like you cannot. It's just like when people are like, "You can't put a dollar amount on your physical health." It's like, once you're sick, you realize I would pay so much money to be well. We don't even realize mentally how much we're struggling and how much better it can become.

Amanda Miles: Definitely.

Katrina Ubell: And then when you're on the other side of it, you're coming around, you start realizing. You're like, "Oh my gosh, this is like a pittance to pay for how much better things are." Right?

Amanda Miles: For sure. For sure.

Katrina Ubell: Amazing. It's amazing.

Amanda Miles: It's so amazing.

Katrina Ubell: So, what would you tell someone who's on the fence, who's like, "I don't know. I don't know if I should do it. I don't know if I really need this"? What would you say?

Amanda Miles: Yeah. I would say you need it. It is a need.

Katrina Ubell: Because pretty much everyone needs it, right? I think we all do.

Amanda Miles: Yes. I think everybody needs a life coach. I've told all my friends. I didn't know life coaches were a thing until I found your podcast, and then I just thought that you were a life coach that the doctors use. I didn't know that there was different types.

I just thought Oprah and people like that had life coaches. I had no idea. But now I'm like, everybody needs one. Everybody needs a life coach. And this work, I don't know why we aren't all taught this. It's crazy.

Katrina Ubell: I know! Well, this is what we need though, seriously.

Amanda Miles: Yes.

Katrina Ubell: It's like, you've got to change it from the inside out, the culture and all of this. I mean, obviously in childhood we need to know this stuff. So, the better we understand it, the more we can start teaching our kids and things like that. But even in terms of curriculum inside of schools, wouldn't that be amazing? And then just thinking about how just even from the premed standpoint, how many of these students are thinking, "If I could just get into med school, then I'm golden, then my life will be so great." Right? And it's just the constant chasing of the happiness. Right? We've all done this.

Amanda Miles: Yep.

Katrina Ubell: And then we get to attending life, and we're very disappointed. Most of us dramatically in debt and given a decade of our lives away. And we're like, "Wait, what just happened, and why am I not happier? This should be better than it is."

Amanda Miles: Exactly. "This is it?"

Katrina Ubell: We all need to know this stuff, and it needs to be coming from early, early on. We need the students to know this stuff. We need them thinking about this as they're deciding which specialties to go into. We need residents to know this. I mean, you've got to think about, even as interns, we're leaders. We're leading these medical students. We don't know what we're doing, and we're like, "Hey, I have this huge tote bag full of terrible thoughts, and I'm just going to pass them down to you. So, if you can carry this for me, that would be amazing.

Amanda Miles: I'm going to teach you all of the bad things.

Katrina Ubell: And then we just keep perpetuating the same thing. Yes. All the bad things, all the terrible things to think about everything, and we're like, "Oh, okay. This is how we think about it." I just think that it needs to ... I always say the medical industry as a whole, the medical community, it's like a cruise ship. It's not a speedboat. We can't turn this thing probably that quick. But if we all keep moving ... It's like, oh my gosh ... Is it Finding Nemo where the fishes all swim down? They tell all the fish to swim down and then that

Amanda Miles: Yes!

Katrina Ubell: You know what I mean?

Amanda Miles: Yes.

Katrina Ubell: I'm like, "That's what we have to do." We have to just be like

Amanda Miles: Exactly.

Katrina Ubell: ... all of us, women physicians who are learning this stuff, just be like, "No! We are moving this way, everybody! This is happening. We are shifting this culture."

Amanda Miles: We have to go this way. Yes.

Katrina Ubell: Continuing on with the way it has been, it's not sustainable, and there's too many doctors that are leaving medicine, I mean, sadly committing suicide. Right? Or are in it and don't want to be. Right? Which is also terrible, when you feel stuck, and of course it's not great for the care that patients receive either.

Amanda Miles: That's where I was.

Katrina Ubell: So, yeah, the more that we are champions of this and spread the news far and wide to everybody, the more ... It's like a movement. Right?

Amanda Miles: Yes.

Katrina Ubell: We're working on it. We're going to get it there. I just keep thinking at the end of our careers how different will it be. I'm sure very different, and I can't wait to see, because I know it's going to be so much better. It can't not be so much better. It just has to be.

Amanda Miles: It's going to be a lot better. Yeah. It has to be. It has to be.

Katrina Ubell: Yeah. It's so good. Well, Amanda, thank you so much for coming on and sharing your whole story and all of it, because we talked about some deep stuff here, and I think a lot of people would be like, "I don't know if I want to share that." But seriously, I know that everybody listening is going to appreciate it so much, because ... Well, I would just tell you. I started this podcast, and I told people on this podcast things that literally my husband knew and maybe a couple other people in my life. And I'm like, "Hi, I guess I'm just going to tell the whole world." But I'm telling you, that willingness to do that is what has allowed I think people to feel like they can trust me to work with them, because

Amanda Miles: That vulnerability.

Katrina Ubell: We have to be like, "Listen, this is what's happening for me. And if it's happening for you too, you're a normal human. You are not broken. There's nothing wrong with you, but there is a way out of this." So, I just really appreciate you coming on and sharing all of that.

Amanda Miles: Of course. Yes. Thank you so much for having me.

Katrina Ubell: All right. Thank you so much, Amanda!