



WEIGHT LOSS FOR BUSY PHYSICIANS

— with Katrina Ubell, MD —

Katrina Ubell: Well, hey there my friends, welcome back to the podcast. I'm so glad you're here today. Got a great episode today. If you're new, then welcome. Regardless of whether you're a physician or not, you're going to get some good help today.

Although, if you are a doctor, there's some real good sleep help in here. Honestly, I got so many questions answered that I've been wondering about for a really, really long time. I think all of us know that sleep is important and many, if not most of us, do not prioritize it enough. But when you're a doctor, if you have any kind of nighttime obligations, it can be so hard to figure out what to do with your sleep. You're going to get some great help today. Today I interviewed Dr. Carol Yuan-Duclair. She is a board-certified physician in pulmonary critical care, internal medicine and sleep medicine. She has an amazing sleep health, telehealth sleep service for women. It's called B. Hai Sleep Health, she'll tell you all about it on the episode here. But she's worked in private practice and in hospital settings, treating patients with sleep disorders.

She has dedicated her curiosity, really to helping women get better sleep so they can lead better lives. We all know that good sleep is important for us. But what do you do when that seems like it's impossible. Or you get into a good little routine and then you have to take in-house call. Or you have to take home call and you get woken up a lot. Or just changes happen in our lives.

We might notice that as our bodies change and we age, that sleep just isn't what it used to be with perimenopause and menopause. So, we dig into all of that today, as well as the importance of sleep in the relation to weight loss. It's like when you don't sleep well, that can cause weight gain, it's not great for you from a weight perspective. Getting good sleep is really important for weight loss.

I always feel like I had some knowledge, but I'm certainly not an expert in this area. While it's something that I help my clients with, I certainly am not an expert for dealing with significant sleep issues. But Dr. Carol is and she is a great resource. We had a great conversation talking about all the different things. If you struggle with sleep, if you know that is an issue for you, if you want someones very intelligent brain on your sleep issue, then Dr. Carroll is your person.

I think you're going to really enjoy this episode, I know I did. I asked a lot of questions that were like, "Hey, listen, I've always wanted to know this so make sure you tell me." I think you're going to really enjoy it a lot. I do want to ask that if you enjoy this episode, please share it with someone that you know, someone who could benefit from this.

It's important for so many women to understand and to get this information. Whether you end up working with Dr. Carol or me or somebody else. It's just important that we get this message out there. I would love it if you would share it. All right. With that, I will give you my conversation with Dr. Carol.

Katrina Ubell: Carol, welcome to the podcast. I'm so excited to have you here today?

Carol Yuan-Duclair: Yeah. Thank you Katrina. I'm very happy to be here.

Katrina Ubell: Wonderful. Okay, so the first thing that I want to ask you about, because I have lots of questions for you. This is actually really perfect timing because I actually didn't sleep very well last night and I'm normally a pretty good sleeper. So, I have a lot of sleep questions. But my first question for you, I'm just curious, how do you define a good night's sleep, how would somebody know?

Carol Yuan-Duclair: I think the best way to define is how you feel the next morning. If you wake up feeling refreshed, ready to get started with the day, that means you had pretty decent night's sleep. In the long run, I think to define if someone is a good sleeper, that is several things. One is, again, how they feel in the morning, the amount of sleep they get, the quality of sleep. Just making sure also that there's not any concerning sleep problems that may be signs of any sleep disorders.

Katrina Ubell: Okay. Here's another question I have. I feel like some people will say, "When I get enough sleep, I wake up and I'm ready to start the day and then jump out of bed." I'm not sure ever a day in my life, no matter how much sleep I've gotten, that I felt that way. I'm like, "If you give me like 30 to 45 minute, warm up period, while I'm coming back into the world." Then I'm like, "Okay." Is that considered normal, if I'm feeling great throughout the rest of the day? Or is it really normal to wake up and feel like ready to go, feet on the ground, tons of energy?

Carol Yuan-Duclair: What you have, taking 30/40 minutes to transition, that's completely normal. That's why for some people we recommend a wake up routine, because it does take time. Wake up routine could be just getting some food, drinking water, to light exercises, getting plenty of sunlight, to let your body know that it's morning, reset that clock. That could, for some people, could take up to 90 minutes. Which is the same amount of time as a sleep cycle. Definitely, that's normal.

Katrina Ubell: That is normal. Okay. Yeah, I think for a long time I've been like, "Maybe something's not right." But I don't feel more chipper the minute I wake up, it's just not me. Okay. We're going to get into all kinds of solutions on what to do if you have all kinds of different issues with your sleep. But I do definitely want to talk about sleep and overweight.

I was thinking about this and to me it's a bit like the chicken and the egg. In the sense that, when you don't sleep well, that can negatively impact your weight. But reducing your weight, like in getting to a healthy weight, can actually really improve your sleep. It's like this cycle. Let's talk more about not getting enough sleep and how that can contribute to over weight?

Carol Yuan-Duclair: Yeah, absolutely. I think what you're saying, the chicken and egg, is sleeping weight. But also sleep and everything else. Because, sleep is really related to all aspects of health. Medical issues, mood, our performance, pain, everything, is like it's bi-directional. But specifically regarding weight. When sleep is short then weight gain is a definite. That's because short sleep makes us hungry, crave for unhealthy, high calorie foods, slows down our metabolism, we burn less fat and it makes our bodies look flabby. Sleep is essential when we want to lose weight. Both in terms of getting to our goal weight, maintaining the weight, and just getting fit, and feeling strong. But this is the thing, sleep also makes your job easier. The analogy I use is, like your favorite kitchen appliance, a slow cooker or a crock pot, how it amplifies the result of your work and saves time.

Once you see the benefit, you're like, "How did I ever do without it." That's sleep when it comes to losing weight. Because, it revs up our basal metabolic rate, it reduces our craving and it helps to burn more fat. That's how sleep, in and of itself, is very powerful in helping us with weight management.

Katrina Ubell: Yeah, totally. Wow! Yeah. The amount of sleep you need, though, is going to be determined by how you're feeling in the morning like you said. Because, not everybody is going to be the same correct? Or is there like a minimum that you're like, "Listen below this, regardless of how you feel, you need to do something." Because, you get those people who are like, "Listen, I feel great on four hours a night." Can we believe them?

Carol Yuan-Duclair: Yeah.

Katrina Ubell: I don't know if we believe them.

Carol Yuan-Duclair: Let me very indirectly get to that, to answer that. You probably tell people this all the time, there's no ideal weight. There is also no ideal amount of sleep. There is the general recommendation, the seven to nine hours. But that is just that bell curve where most people need that. There're definitely people who fall on either side of that curve. But most generally, most people we need at least six hours, minimum six hours. When someone say they're doing great on four hours. The question I'm asking is, how do you know? How do you know that what you're defined as great is not just a baseline that you've gotten used to.

Katrina Ubell: Right. You don't even know how good you could feel. You're like, "I feel great." But you don't know that that's actually not that great compared to how good you could feel.

Carol Yuan-Duclair: Exactly.

Katrina Ubell: Yeah, okay. Because, some people it's a source of pride, like, "I just do really, really well without needing any sleep." Interestingly, I just said a night or two ago, I actually saw on the New York Times that there was some study that they were reporting on. That said that, "If you consistently in middle age get six or fewer hours of sleep..." Or maybe it was fewer than six hours of sleep. That increases your risk for dementia in your 70s. I was like, "Well, there you go. Okay."

Carol Yuan-Duclair: Yeah. That's big these days, is the association between short sleep and increased risk for dementia.

Katrina Ubell: Yeah. Well, and definitely nobody wants that for sure. Are there certain sleep issues that you see more commonly in women or that seem to be worse than women? When you're thinking about sleep in women, what are the common things that they're dealing with?

Carol Yuan-Duclair: I think what's unique to women is the challenges that we face. Our bodies change and that includes; menstrual cycle, pregnancy, menopause. Means that our sleep patterns change too. Because, sleep is multi dimensional, it is also psychological, social, cultural, environmental. The gender biases that women face in our society and culture can impact sleep as well.

Just for an example, women carry most of the caregiving responsibilities, from childcare, to taking care of aging parents and family members. That is related to women experiencing and reporting more commonly than men, anxiety and stress. Both of which we know is associated with insomnia. Then when women do go to the doctor and talk about their symptoms, a lot of times they get dismissed to just being their anxiety and stress. Leading to delayed or misdiagnosis of problems, including sleep disorders. It's a perfect storm of all the reasons why women can't sleep.

Katrina Ubell: Yeah. Where do you even start to tease that apart?

Carol Yuan-Duclair: Woman needs a lot of structure and framework. Because, we anticipate these challenges that's going to come up. What I do is, for every woman, I first start with a medical evaluation. Just making sure that there's not a sleep disorder. Healthy sleep is the foundation of sleep health. How I like to compare is, it's like cooking, you want to use the best and fresh ingredients.

Sleep, free from the burden of any disorders, it's like the fabric of a true good sleep. Then the next step is, I hope women discover and learn about their chronotype. That's their sleep circadian rhythm, which is unique to everybody, just like the amount of sleep we need. Use that as an anchor and then we build out sleep flow.

What I call sleep flow is a sleep schedule but it's more adaptable, flexible and less stressful. The reason I do that is because we hear it all the time, that people say, "Oh, get eight hours of sleep." Or there're these 5:00 a.m. club Katrina Ubell: Yes. People love that. Yes. I'm not a member of that club. Carol Yuan-Duclair: Good, because we're all different and sleep shouldn't be one size fit all. It's important for us to understand what matters when it comes to sleep. Stick with the principles and not just a laundry list of universal sleep hygiene. When women have their sleep flow, they understand their see flow, they're in charge. That's very empowering. Because, a lot of times women feel that sleep is out of their control and that causes anxiety and stress. That's the general, the process that I work with.

Katrina Ubell: You go through. Yeah, I love that. I was wondering, obviously many, many doctors have disrupted sleep for a variety of reasons. I was wondering if you had some some thoughts. I'm not a huge fan of the tips, tricks and life hacks kind of a thing. But if you could offer something that could be tangible, that somebody could could actually apply and maybe see some results.

The first thing that comes to mind is all of our friends who work night shifts. Who are working shift work, particularly people who are working like that rotating schedule. Which my understanding is that research shows it's terrible for you to do that. But if that is your job and for better or worse, that's what you're going to be doing for the next however long. What can you do to support yourself with sleep?

Carol Yuan-Duclair: Yeah. Shift work really is, I feel like it's the as the mother of sleep problems. It completely disrupts our circadian rhythm. Unfortunately, I know a lot of us in healthcare have to deal with that. I think that's just another beast on its own. Specifically, for that, I think it's almost like when we have the three legged stool for a healthy lifestyle, diet, exercise and sleep.

If sleep is just unfortunately has to be a bit wobbly because of work, the other part has to be particularly strong. You have to really make sure that the other two are good. Yeah. Then for sleep itself, because the schedule is off... When it's possible, you want to use all of the external cues that's available to you, to reinforce your circadian rhythm.

When you're back from an overnight shift, don't go to bed right away, but really get a lot of sunlight as much as possible. Already plan out your sleep schedule so you know when you need to go to bed. So that you can get that seven, eight hours of sleep before you have to get up for work again. Know what that time is and plan for the schedule before that. So you can get enough sunlight, eat and drink. But maybe follow that two to three hours before your bedtime. It's a matter of planning for changes to align yourself better with your social biology clock or social clock I should say.

Katrina Ubell: The purpose of the sunlight then is to keep the circadian rhythm, to help your brain know what time it is. Is that the purpose of it? I'm asking, it's actually really interesting when I was a resident, actually, when I was an intern. The program decided to just do a test situation where some of the residents, or so some of the interns, would just do a whole month of nights.

Rather than having to take regular call every fourth night or whatever, you could just work a whole month of nights. I ended up working a month of nights and the stuff down ICU. I see a pulmonologist, I don't remember who, anyway. One of the doctors there came and spoke to us and was saying how like, "What you need to do is get the darkest sunglasses you can and hopefully ones that like..."

Basically he was like, "You want to block out as much light as possible on your way home from the hospital. Then try to go to right to sleep, like keep it really, really, really dark." Of course, this is very challenging and I don't know if really makes a difference. This is obviously a long time ago too. So, just a direct opposition to what you're saying. The purpose of that sunlight is for what?

Carol Yuan-Duclair: The difference may be what the exact schedule is. Let's say, from you leaving the hospital to you having to come back again, it's only a little over eight hours. Then you need to spend most of the time sleeping. Then then in that case, you don't want sunlight. Because, it's confusing, because your goal after leaving the hospital is you want to hit the bed and get some sleep. But if the the hours between your shifts is, let's say 12 hours or maybe even a little longer, so maybe-

Katrina Ubell: Maybe 14 or something.

Carol Yuan-Duclair: Let's say 16, 12 to... Okay, so let's say 14 minus let's just say seven, of time that you're going to be sleeping. The rest of the seven, you're up. That seven is where you can schedule and budget to see maybe a little bit of sunlight exposure. Just to give your body that external cue to have a better differentiation between day and night.

Katrina Ubell: Well, I was going to say, especially if you're only going to be working nights for a couple of nights. For the people who are on that rotating schedule, it seems like it would make sense to like, "Don't forget body, it's daytime." You know what I mean? But compared to, I'm working a whole week of nights, ongoing, ongoing for weeks on end.

Yeah, okay, I love that. That makes sense. It sounds to me that what you're saying is very similar to actually what I recommend with eating, with weight loss. Is like, there's not going to be a one size fits all kind of plan. Anybody who tells you this is the way you should eat it's probably just not going to be something that you... It might work for a little while. But it's probably not something you're going to be able to continue on long term ongoing.

What we want to find is something that's going to be an ongoing solution, where you figure out what's best for you. So you know and you're in charge. If your sleep plan needs to change for whatever reason, you know how to change that and you can still take good care of yourself?

Carol Yuan-Duclair: Yeah, absolutely. To feel that you're in charge, in control. And to have a plan that fits your body, your biological clock, it's so important.

Katrina Ubell: Yeah, definitely. Okay. Then I was thinking about all the people who are getting woken up at night. Obviously, anybody who has an infant or a toddler who doesn't sleep through the night yet, that can be an issue. But even so, I took home call when I was in practice. You know how often that was, but it was usually once or twice a week.

What I would find myself doing is, like I didn't want to have just fallen asleep for like 30 minutes before the pager went off. Because, then it would have been like I took a nap and then I really couldn't fall back to sleep again for hours. I would end up staying up super late and this is how I would justify to myself. Because, maybe at 11:30 or something, the pager would go off. I'd be like, "See, I'm so glad I wasn't asleep, they would have woken me up." But then, of course, I wouldn't get enough rest. The next day, of course, feels terrible. I usually would not be making up for it on the tail end or even pre sleeping extra to make up for it. Then that cycle would continue ongoing.

I didn't even have to go in, I just had to roll over and talk to people on the phone. Some people actually will have to potentially get up every time their pager goes off, they might have to go into the hospital or something. How do you approach that kind of a situation, the awakenings?

Carol Yuan-Duclair: The frequent awakenings. Yeah, this is also just something that's completely external and it's bad for sleep.

Katrina Ubell: Being a doctor is bad for your sleep. That's what we're learning here.

Carol Yuan-Duclair: Hopefully, what I would look at is, how frequently does that happen. Hopefully, that is not more than two to max, three nights a week that you have to deal with that. Hopefully, that's the case, then you want to make sure that the rest of the week, you really get protected, consolidated, good quality sleep. For those nights that you're on call, consider, like what you were saying, pre-sleep. Consider napping, strategic napping. That's 30 to sometimes even 90 minutes, depending on what you're trying to do and the timing of the nap. But use pre-sleep to catch up a little, even though we can never completely catch up on sleep. But this can at least help to offset that disturbance, somewhat.

Katrina Ubell: Because, you can't control it, like you could be woken up five times in the night by people calling you potentially. If you have to get called in and you have to deliver a baby or you have to operate on someone or whatever, it's out of your control. Instead, focus on the days when it is in your control or the nights when it is in your control.

Really do the best you can there, so that maybe it's not as much of a hit to your system. And those nights are aren't so great. Okay. Then we have people who they just have to take in-house call. They're sleeping in the hospital, regardless, and maybe they might sleep all night. There's times where they don't get woken up and then there's other times where they might be up all night or woken up a bunch of times.

I remember experiencing this as a resident and and I hear about it from my clients all the time. That just being in that environment, like the different environment... We talk about things about like stress relief tactics and meditating. All these things you can do to calm your body and get yourself into a parasympathetic state. I think there is just this part of your brain that is like in that. Almost like a fighter flight, ready to pounce, I have to be ready to go at any moment. That can make it hard to get good sleep?

Carol Yuan-Duclair: Yeah. There's no way for us to get into that parasympathetic mode when we're in the hospital. Because, the whole reason you're in the hospital is someone potentially is going to need you, is going to call you.

Katrina Ubell: Right. Exactly.

Carol Yuan-Duclair: Yeah, so that even happens at home. I know a lot of people, even taking call from home, anticipating that beeper going off can make it hard for them to fall asleep. Just consider it a night ruin. There is really nothing much we can do when you're sleeping in the hospital. Who knows what the lighting is like? I know the call room I've been in, it's never pitch dark. There's room, there's noise.

Katrina Ubell: Yeah. You can't do all the things to block that out, because you need to be able to hear the pager, or your phone, or whatever, right?

Carol Yuan-Duclair: Yes, put in that earplug.

Katrina Ubell: Right. You need special earplugs that will wake you up for the thing you need to be woken up for.

Carol Yuan-Duclair: Right.

Katrina Ubell: Well, I actually like that, consider the night ruined. Rather than just like, "I've got to figure out how to make this great night of asleep." Just being like, "That night is just not going to be great, most likely it's not my best work. We're just going to do the best we can and really focus on the nights that you do have control over." I think that that is actually pretty empowering. Because, then you can stop trying to spend so much time trying to figure out how to make the night in the hospital good.

Now, would the same thing apply to people who struggle to sleep when they travel. I feel like as I've gotten older, the first night in a hotel. Even if I'm on vacation, I'm so happy to be there. It's not like I don't feel safe or anything. But that first night is just never quite as great?

Carol Yuan-Duclair: Yeah, travel is another thing that disrupts our sleep. One is because the environment is completely different. Things that you are used to associate with sleep is not there anymore. Then probably sometimes you have to deal with jet lag also, so that can interfere with sleep. I think that depends on the person, what your sleep issues are when you travel and how much of a jet lag you need to adjust. There are still things that we can do not to make it completely go away. But maybe we can make that adjustment, a bit smoother, a little shorter.

Katrina Ubell: Yeah, okay. Yeah, I think that's great. I've always felt like I've been just a great sleeper or a solid sleeper. I was the kid, any car trip, wiped out, completely asleep, I could totally do that. But as I've gotten older, I'm 45 now, as I've gotten older I've noticed that there's a lot of things where it is harder. Or I'll think, "Oh, I'm so tired, I'm just going to take a nap. This would be the perfect time." And I just can't fall asleep and I really wish I could.

I tried to tell myself just resting was totally worth it, and that was still good. I think it is really easy to tell a very sad story to yourself, about how awful you're going to feel because you didn't get enough sleep. That, of course, then makes the experience of not having the sleep worse?

Carol Yuan-Duclair: Yeah. I think that's what we were saying before, that our bodies change as we get older, going through post menopause. Expect that our sleep patterns are going to change. That doesn't mean there's anything wrong and doesn't mean you're going to have to feel worse. The first is, once we know what to expect, then we can prepare for it. To come up with a plan to deal with the changes.

Katrina Ubell: Yeah. There's a lot of people who just have this identity of like, "I'm a bad sleeper, I'm a poor sleeper. I'm like a hopeless case when it comes to sleep." Well, first of all, I believe that that's self fulfilling. When you believe that, then of course that's going to be your experience. But are there people where just the best they can really get to with concerted effort, is just okay. Or do you really believe we can really get to a pretty good place with everybody?

Carol Yuan-Duclair: Right. I think that's both. One is self fulfilling. When you keep saying that then you're giving yourself also an excuse of not working on it, because this is just how I am. Number two, it's also working on that expectation. For these "bad sleepers." Yeah, their ideal sleep or their perfect sleep, may not look the same as someone else who would sleep seven, eight hours and wake up only a few times.

Their ideal sleep may be six hours four nights out of the week is good. Three nights, they suffer a little. But that is their perfect sleep. Aligning, again, that expectation. Knowing that you can work towards that and that is your goal, that's how I would work with someone like that.

Katrina Ubell: Yeah. It's like basically reframing what success is, essentially. Like having a goal that's achievable, and reasonable, and reachable? Yeah. Okay. I love that.

Carol Yuan-Duclair: Yeah. Then the ultimate goal, again, is how you feel. Sleep, like we said, is not defined by the hours, by how many times you wake up. But how do you feel?

Katrina Ubell: How do you feel, yeah. Okay. Now what about people who share a bed with somebody? Whoever that is, whether that's an adult or a child, wakes them up. Snoring is a big thing, or restless legs, or just getting up to go the bathroom a lot, or even their pager going off in the night, when they're taking call potentially. I know that happens for me sometimes with my husband. A lot of my sleep hygiene habits are, honestly, to try to not have what he does interrupt me or bother me?

Carol Yuan-Duclair: Yeah, that's definitely a problem and what you're saying how a partner... What I would say is, sharing a bed, hopefully partner is what we're dealing with. For anybody who is dealing with sharing the bed with their child or a pet. That's another topic that we have to work on. Because, that should not happen. I know it's not easy, but that is just

Katrina Ubell: Culturally, it can be hard too. Because, for some cultures, part of the culture is the co-sleeping?

Carol Yuan-Duclair: Yeah, right. But it really doesn't help you to sleep when you sharing bed with the whole family or a pet. With the partner, first thing, if possible. If it's possible, king size bed is the minimum.

Katrina Ubell: I 100% agree.

Carol Yuan-Duclair: Because, you have two adult human bodies sharing a bed, the first thing you need is space.

Katrina Ubell: Yes.

Carol Yuan-Duclair: Then for the rest of the stuff is working out a plan. If their pager going off, then maybe on the nights that one of you is on call you might consider sleeping in separate beds. For snoring, the partner that's snoring maybe should have an evaluation, see a doctor, see why they're snoring and potentially get rid of that. The other partner who is being bothered by it can consider wearing earplugs.

Katrina Ubell: Right. I think you just have to get creative to figure out... I just like to have a real solutions focused mindset and that's what I encourage with my clients. Rather than just like, "Poor me, this sucks, there's just nothing I can do about it." Instead just thinking, "There's got to be something that doesn't even necessarily..." Because, even just like the idea of sleeping apart for some people is very charged and that's like a whole other thing for a lot of people.

But even if that's off the table, there's certainly got to be a way that you can figure out a way to at least significantly improve the experience. You just have to keep trying to figure that out. I've talked about, it's been a long time since I've talked about it. But I'm sure you're familiar with the chiliPAD or I think now they call it the Ooler or something. It's like the new version of it or whatever.

But basically, I would just wake up in sweats for like a week, a month. I tried for a long time to figure out like; is it related to my cycle, is it related to what I eat, is it related, whatever. I could not figure out any pattern and it would just come on whenever it came on. Of course, I'd wake up drenched in sweat, totally uncomfortable because of that and didn't want to spend the money on the chiliPAD. That was the dumbest part about the whole thing. I'm like, "Maybe it'll go away." It wouldn't go away. Finally bought that thing and it has changed my life, it helps me so much. They have got to create a travel version. Because, now my whole setup at home is so great, when I leave I really miss it.

Carol Yuan-Duclair: Yeah, wow. That's amazing.

Katrina Ubell: It is. This is not sponsored, like I'm just a raving fan, I love that thing. It's for anybody who has temperature issues. I live in an old house and so sometimes it's hot in the summer. It can be really cold in the winter because I live in Wisconsin. I can just set it to exactly how I want it. Yeah.

Carol Yuan-Duclair: For hot flashes, that would be beautiful.

Katrina Ubell: For hot flashes. Yes.

Carol Yuan-Duclair: Yeah.

Katrina Ubell: Yes, totally. What I always say about it, I'll just say it again, for anybody who hasn't heard. Is that it doesn't feel like it's cooling me. What it feels like it's doing is pulling the extra heat off. It may sound like semantics, like what's the difference? But it's like versus like cold being put on me, people are like, "I can't stand being cold." I'm like, "No, but it's not making you cold. It's like you're still warm but the extra heat that you don't want, it just leaves you. So that you're the right heat." It's great, I love it. Okay, so how do you know that you need to get some help with sleep? Because, obviously you work with women to... Or do you work with men too or mostly just women?

Carol Yuan-Duclair: I have worked with men and women. My telehealth practice is focused on women.

Katrina Ubell: Okay. There's going to be people who are like, "Yeah, my sleep's not great." There's obviously got to be a certain level of a pain point where people like, "I need some help, I need someone to help me figure this out." What would you say for someone who's like, "I'm kind of on the fence."

Carol Yuan-Duclair: Right. For the patients that I see in the office, they come to a doctor's office because they just know there's a problem. Other people have told them, they've been feeling tired, they know. That's usually people who have suffered for a long time and finally they decided to make the change. But for the rest of us, this comes to why sleep is important.

I think the bottom line is, in addition to all the fancy or scientific studies that have shown about how bad sleep associate with dementia, health related stuff. But sleep it's the one thing if you're able to do it well, it makes everything else easier. For whatever it is that you're trying to do, sleep is going to make it easier.

Without regular full night's rest, you cannot be at your best doing it. The examples I give to people, if you want to be a better parent, you want to be fully present with your kid, you want to come up with the right answers to their questions, you want to just enjoy and savor every moment when you're with them as they grow up. You need sleep. You want to be a better doctor, you want to give your best to every patient, keep up with the medical literature and be dependable for your colleagues. You need sleep. If you want to lose weight, you want to get to your goal weight, maintain the weight. Adopt a lifestyle and not just a fad. You need sleep. Sleep is also a tool that can be used strategically, to get you what you want, to achieve your goals.

Katrina Ubell: I love that, that's amazing. Here's the thing, it's like you say that and I think everybody listening is feeling like, "She's right. I know she's right." It's like we know that. I know for myself, I'm totally happier, I'm a nicer mom, just my experience in my life is better. Just everything is better when I get enough sleep. The one that we didn't even talk about, like getting sucked into binge watching a show.

You know how all the streaming services just go right to the next thing. Or they leave you with a cliffhanger and you got to find out what's going to happen. Then all of a sudden, it's 1:30 in the morning and like, "Oh shoot." You've gotten the second wind and you feel like you can't fall asleep. I mean, all of that comes down to just having that plan for yourself and following it.

It's so similar to planning your food and it doesn't really matter if you want to eat it in the moment, you should just do it. Because, long term it's going to help you. It sounds like it's the same thing here. It's like I understand you want to stay up. Sometimes I think about myself as like, that part of me that wants to stay up is like that eight year old who's like, "I want to stay up till midnight." You're like, "I know you think you do, but trust me, you don't."

Carol Yuan-Duclair: Right. Yeah, I think it's probably like losing weight. What you would tell your clients is, we can also have fun doing it. It doesn't mean that if you want to commit to your sleep, you can never stay up late again, you can never sleep in late again. You can always make an exception. You will learn what to do when you want to make those exceptions. So that it doesn't evolve into a chronic sleep problem disorder. Also how you can still feel relatively refreshed on those days. There are things that you can learn that can help you to just overall be a good sleeper.

Katrina Ubell: Yeah, I think that's that's actually really great. Because, that makes it so much more doable long term. Just like with eating, when you feel like you have to do it perfectly and then you're white knuckling it following some plan. The minute you eat off plan you're like, "Screw all of it." And you're diving headfirst into the bucket of ice cream and eating it all.

It's the same thing with sleep, where you're like... And I've done this too. I'm doing really good and going to bed when I want to be going to bed. Then stay up too late or whatever happens and then it's almost like I never had that plan in the first place.

It's like, "What plan?" You know what I mean? Like, "Was there a plan? I forgot." But I'm sure working with someone like you, really can help with that recovery. How do you get yourself back on track again and make that more than norm. The exceptions truly are exceptions?

Carol Yuan-Duclair: Another way I like to think about it is, you know how we all like taking me time for facial, massage, or just going out with the girlfriends. Sleep is the ultimate me time. It is really the ultimate form of self care. It's when we can shut down everything, stop giving. Because, that's what as women we do all the time, we're constantly giving; our time, our care, our focus our bodies, to everybody around us. But sleep is when we are to ourselves and we just focus on this inner biological spring that rejuvenates and restores our mind and body. If you think of it, it's kind of a fun time. It's not a sacrifice. It's something

Katrina Ubell: Especially if the sleep is good. If you can fall asleep relatively easy, and you're not tossing and turning, and things like that, and you wake up refreshed. It's like, "Oh, that was so great."

Carol Yuan-Duclair: Yeah. Well, but that's about being in charge. If you have learned to be in charge of your asleep, then yes. And you feel refreshed when you wake up, then it is really a fun thing to do.

Katrina Ubell: Yeah. One thing I feel called to mention here is, when I was... I don't know I did this so much when I was resident. But for 10 years in practice, especially when things weren't necessarily going super great at work. The night before I needed to go to work, I'd often stay up late. Or if I was working two days back to back or several days back to back. Even if I was so tired from working all day, and I wasn't on call, so no reason not to go to bed. I would stay up late.

You know just how it goes. You think, "I'm going to go to bed." And then you don't. Then before you know it, you're not getting enough sleep and then you're mad at yourself for not getting enough sleep. It took me till after I actually left my practice, to figure out what that was all about. I just feel like I want to share that here. Because, I spent so much time beating myself up over that, thinking something is wrong with me, that I didn't have like a discipline. What was my problem, why couldn't I just go to sleep.

But here's really what it was and this is where mindset really comes in. Is my experience of my job was not super positive and so I would make myself stay up later. Because, if I went to sleep, that meant that the morning came earlier and sooner. It felt like morning came sooner because I was asleep that whole time and then I'd have to go back to work, which I didn't want to go and do.

That was the whole point about. If I was so tired, why wouldn't I just go to sleep? Because, then before I knew it, I was going to have to go back to work again. It's like if you've ever had like a stressful work dream, and then you wake up, and then you got to go to work. And you're like, "I just worked a full day in my dream." Like, "What the heck! I already feel like I'm done working." It makes so much sense to me now that what I really needed help with was my beliefs, my thoughts, the whole way I was interpreting my day at work. So that going to work didn't feel like such a hardship, didn't feel as difficult as it did. So that I wouldn't be staying up late trying to extend that conscious period of time where I wasn't going to work.

I think it all plays in. But I just wanted to mention that for anybody who is just thinking like, "I don't know. I don't know why I can't get myself to go to bed sooner." It could be related to that. It may not really actually have that much to do with the sleep. It's much more to do with how you're spending your day.

Carol Yuan-Duclair: Right. Yeah, and that's why sleep is multi dimensional. In this aspect, yeah, it's psychological, it's mental. It's not just physical.

Katrina Ubell: Right. Yeah. Well, I love it, my gosh. It's so good. Everyone knows a great night's rest is like so good. I feel so good afterward, it's so awesome. Okay, so tell everybody how they can find out more about you, and how they can work with you, what kind of services you offer?

Carol Yuan-Duclair: Yeah. If you're ready to level up your nights and strategically use sleep to help achieve your goals, I'd love to work with you. Schedule a consultation, go into my website at www.bhaisleephealth.com. It's B-H-A Isleephealth.com. If you're wondering if B. Hai's the right fit or you just have questions about the best place to get sleep resources, shoot me a DM. I'm always on my social media platforms. That's LinkedIn, Twitter, Instagram. Also, if you want to collaborate or would love to speak to your audience about sleep, email me it's Dr. Carol D-R-C A-R-O-L@bhaisleephealth.com.

Katrina Ubell: Just so everybody knows, just tell everybody what the backstory is of how you named your program?

Carol Yuan-Duclair: B. Hai is my daughter's Chinese name. B means Jade and Hai means ocean. I named the practice after her as a gesture to represent the next generation of women. Women are the backbone of our society and when we take care of ourselves, the whole society benefits.

Katrina Ubell: I 100% agree with that. When we're not getting good sleep, everybody feels it, family. It has far reaching effects. Yeah, totally that's amazing. Okay, awesome. Carol, thank you so much for coming on and sharing all of your wisdom with everybody?

Carol Yuan-Duclair: Thank you Katrina. That was great.