



WEIGHT LOSS FOR BUSY PHYSICIANS

— with Katrina Ubell, MD —

Katrina Ubell: Well, hello there my friend. How are you doing today? I'm so glad you're here. So glad you're joining me. I always hear the people say they can't hear background noise, but I was just checking. I don't know. My dog is just losing his mind today and I don't know what to do. I think he's mad at the washer, the clothes washer. I don't know. I don't know what to say. There's yard work going on in the background somewhere. I'm like, "You know what? That's just how it rolls sometimes when we work from home." I'm not in a sound studio. It's just how it is.

So this episode is airing the first week after American Thanksgiving. So just wanted to wish you heavy Thanksgiving belated. And also have you check in, how did it go? Did you create a plan? Did you follow your plan? Are you happy with how it went? Even if food wasn't an issue, how did it go for you mentally in terms of your thoughts around the food? Did you struggle to not eat certain things? Was your over desire kicked into high gear? Were you struggling with different relationships or seeing people? The conversations that happened throughout that day? Because I always feel like Thanksgiving or big holidays like that are just a magnifying glass on what is actually going on in our lives. If you want to know why you struggle with your weight and overeating, just think about what happened on that day. Just a little time pondering that, and you'll probably get a lot of awareness out of it.

I also can't wait to share with you success story to weight loss, success story of my client, Stephanie Dailey. She is an amazing nephrologist. She's in a two-physician family. They have five children. Okay. Some of whom are adopted. They are just this amazing couple. And she has not only created great weight loss success, but really has changed so much of her experience of her life in so many different areas. We actually didn't even get into all of them on our conversation, but she really shares how she made working as a doctor more fun, how she actually started enjoying her job again. And so much of the work that we do is around this, right? How do we take something that feels like a slog? We're so stuck and it's never going to be fun. And how do we learn to enjoy it again? And that's exactly what's she's done.

She talks all about her life, her relationships, particularly with her daughter. It's amazing. So good. And I just think that there's always so much that we can learn from hearing about other people's success. Remember that success leaves clues, right? People have success, we want to pay attention. We want to listen to what they say and make sure that we are gleaned from their story, whatever we can to help us. We don't have to reinvent the wheel.

We don't have to be the first one to figure everything out. Other people have paved that path and we can go, "You know what? Ooh, that's a good pearl. That's a good nugget. I'm going to apply those to my life and get started getting some results."

So please enjoy my conversation with Stephanie Dailey and to join me on the free training how losing weight is different for doctors and what to do about it, head over to katrinaubellmd.com/different. All right. Please enjoy Stephanie.

Katrina Ubell: Stephanie, thank you so much for being on the podcast.

Stephanie Dailey: You are so welcome.

Katrina Ubell: I'm so glad you're here today. I am really excited for you to share your story and tell everybody about just all the progress that you've been able to make through life coaching in our program. And I think it's so... Oh my gosh, it's so good. But we always like to start with little introduction. So just introduce yourself a little bit, what you do, where you live, a little bit about your family.

Stephanie Dailey: Perfect. Perfect. So I am a nephrologist in Louisville, Kentucky. And my husband is also a nephrologist and we have five kiddos. So two working physicians, five kids, crazy, busy home. And yeah, I have struggled with weight loss since college. I think that was really when it started. And I just found myself in college 20 pounds up, 20 pounds down. And that was okay. I was doing all the different programs. I've done them all. And then after having some pregnancies, the weight just kept piling on. So what happened for me that was the biggest start to all of this was COVID and I'm sure a lot of people can relate. So in February, March the world shut down and I was coping with food at a very alarming rate. By April I was like, "I'm not going to survive this pandemic if I don't do something. If I don't do something, I'm not going to make it."

Katrina Ubell: So within a couple weeks really, right? Because I always think of it as March 13th is when everything shut down because that's my mom's birthday. Is the date in my head. So it was pretty quick. Within a couple weeks you were like, "This is not good."

Stephanie Dailey: Right. Right. Exactly. So yeah, it was in April and I was like, "You know what?" I thought the weight was the problem, not the other way around, right? I was like, "Oh, if I could just control the eating, then everything else would magically be better." And it was not magically better. So anyway, I was online one night and I had considered meeting a surgeon to talk about a gastric sleeve, is where I was. And I'll back up and say I have some amazing friends who have taken that route and they've done phenomenal. They've done phenomenal. And I'm so thankful for them. But I just knew in the pit of my stomach that's not where I want to be kind of thing. So anyway, I was on the internet. I had not heard of your program. I had not done the podcast. And I'm thankful for that, because that's my journey, right? And somebody mentioned your name and I clicked on your website. And it said two things. The first thing it said is weight loss for busy physicians and I was like, "Check mark, I can relate." Right?

Katrina Ubell: That's me.

Stephanie Dailey: I'm in that club already. And then the second thing it said was lose weight permanently, lose weight for the last time, something along those lines. And I can tell you if there was ever a moment in my life that I felt like my brain just opened up and shot fireworks out the top, that was the moment.

Katrina Ubell: You were going to be so lucky.

Stephanie Dailey: Right. And I was like, "Oh wait, no, no, no, no, no, I've signed up." I'm a lifelong member of all these weight loss programs because they told me the weight was going to come back, right? I'm lifelong. No. And so I was so excited. I was so excited. That's all I needed to hear you say and I just had faith. I paid my deposit that night not knowing what I was in for, isn't that fun?

Katrina Ubell: I love that. So fun. You're like, "I don't know what this is, but I know I need it."

Stephanie Dailey: And what I told myself is, "I really have nothing to lose. Well, I have the financial commitment, but if this doesn't work for me, then I know I have to look into surgical options. And if that is where I need to be, that's where I need to be. But I want to know before I do that that I have checked off every other box."

Katrina Ubell: Yeah. Totally. Which I think is actually really smart because we've had plenty of people come into the program who have had bariatric surgery of various kinds and still have struggled and still need help. And even we get people who come into the program who are like, "Listen, I don't need to lose weight, but I know I need to work on my brain." So it's like you can come at this work from lots of different angles, but I think for people who are... I mean, obviously I'm not going to speak to everybody's personal situation. I can't possibly know what's the right thing for everybody. But I do like to suggest like, "Hey, you know what? You might want to consider trying this work first before you get the surgery, because then at least you're, you're setting yourself up for success even if the surgery is required after."

But what I typically find is people are like, "Yeah, I don't need to do that because I've really solved this." And I've even had bariatric surgeons recommend my podcast and my program to people. Yeah. I'm like, "Okay, so they're on board. They understand that there's this angle to it," right? That's one element that can be a solution, but there's these other aspects that we have to deal with if we don't want it to turn into another problem. Because that's the other thing, right? You can get the bariatric surgery and then not over eat anymore, but lots and lots of people who do that end up with an alcohol dependency or overusing alcohol or overdoing something else.

Whatever you use to make yourself not feel, you'll just find something else. So maybe it's not food anymore, but now it's a different problem. And what I've always said is, listen, if food is going to be the thing, then I think I'd rather just stick with food than have to figure out how to stop doing some other thing too, because I'm hopping between different ways of not feeling my emotions.

Stephanie Dailey: Yeah. Yeah. And I will just share that my husband and I had found that early on in our marriage before we had kids, we were doing that with alcohol. So we had made a decision 15 years ago to just be an alcohol-free home. If we're out and we want to have a drink socially, fine, but for us having a drink every night after work wasn't a way we wanted to show up in life.

And so I was the same way. I was like, "Oh, if I get rid of the food, I'm going to start stocking wine again." And I was like, "Oh, no. No you're not going to stop stocking wine again."

Katrina Ubell: Right. Exactly. Exactly. Totally. Totally. So okay. So you sign up for the program, you're like, "I don't know what we're going to do, but I'm going to do this." Now what happened after that?

Stephanie Dailey: So what happened after that was I did it very much. If you said it, I did it. If that is what your program taught me, I did it. So obviously my motivation at the beginning was once I made my protocol and I ate my foods, I started dropping weight like a rock. I mean, it just was phenomenal. And the most exciting thing about that for me was that was the first time in my life I had not been miserable losing weight.

Katrina Ubell: Me too.

Stephanie Dailey: I was in—

Katrina Ubell: I just want to say, right? Usually it's so uncomfortable and you're like, "This is actually okay. More than okay." I love that.

Stephanie Dailey: Yes. I mean, I had done the programs where you count the food, you measure the food and the programs where you buy their food. And I was like, "That's just for me misery." Eating this cold box of food, that's a tiny amount of food because someone else told me to do it. I knew 100% that wasn't sustainable for my life. And that wasn't a way I wanted to live. And I was living on diets to even attempt to control my weight. I just was so excited. After the first month I was like, "I have the ability to choose my foods. My brain is in charge. My brain is going to do what I tell it to do." And I'm an adult and I make decisions and I just loved it.

I loved that I had the ability to write a protocol, to follow it, to buy food, to plan food and lose weight. And really I cannot say this enough, before I met you and your program, if you had told me if all the things you can do or not do in life, I would've said that was something I could not do. I would said like, "I could probably be a sky diver." And I am terribly afraid of heights before I could choose my own food and lose weight.

Katrina Ubell: Right. Well, and that's the thing. The whole industry has taught us that we can't trust ourselves, right? If you could trust yourself, then you wouldn't have this problem. Therefore you need us to come in and rescue you and tell you what you need to do. And then when you're not able to do what they say, then it must mean something negative about you, right? It's not that their program's the problem, you're the problem. And so then this is just what we repeat and repeat and repeat. And we're like, "I've just got to find that one person who's going to be able to tell me that thing that I need to do, that I'll be able to do and ongoing." And we never find it.

We have to take back that ownership that we actually are the experts in our own lives. I mean, two-physician family, five kids. How could I or anyone possibly know what is the best way for you to eat, but you know. And so with some guidelines and some instruction, you can create a plan that works for you. It's so empowering, right? Then you're eating food you like, it tastes good to you, that you can prepare that works with the family, works with all the other limitations in your life and you like it. And it's not a hardship. Isn't that amazing? Oh my God, I love it.

Stephanie Dailey: It is amazing. And early on you guided us through the model where you've had plans, A through G and what a comfort that was. I went through every scenario, the kids sporting event goes over, I'm stuck at work, I didn't get to the grocery, whatever. I did every scenario that I could think of and had a food plan for it. So I wasn't in this state of panic like, "Oh my gosh, what if I don't get home to measure the amount of green beans I'm going to eat? Or what if I don't get home to heat up this nasty meal that I've purchased that somebody else has told me to have for dinner."

Katrina Ubell: Yeah. Totally. It gives you that flexibility and freedom to live your life and still be able to eat in a way that serves you, which is how this ends up being permanent, right? Because you are learning how to actually live your real life and make decisions that support you, that work for you. I always remember sometimes they'd be like, "Well, you need to buy these real specialty foods." And sometimes if I was in some group or something, they'd be like, "Well, I live in the middle of nowhere. That stuff's not available." They're like, "Well, you can just try to buy it online." I'm like, "Yeah, that is true." But really the answer is that we have to buy three-fourths of our food online because we live in a more rural area. I'm like, "That just literally doesn't make sense to me. It really has to be that complicated. It probably really doesn't." That was always I think what kept me going. It's like, "Does it really have to be this hard? I just can't believe that weight loss has to be so complicated or so difficult. There's got to be some other way." And I'm glad I kept persevering to find it.

Stephanie Dailey: Yeah. And I remember you, I don't know if this was on a coaching call or in a video you sent, but you said at one point, "I made the decision I'm never going to have a supplemental shake again. I don't enjoy them. I don't like them. I'm never going to have one again." And I was like, "Ah." I just got so excited when you said that because I was like, "She has succeeded at weight loss and keeping her weight off and I don't ever have to eat a frozen prepared meal again, those nasty gross meals to lose weight."

Katrina Ubell: Oh my God. The protein powder shake things, oh my God, I have tried dozens and dozens. The amount of money I have spent and wasted on those things, I have never found one that tastes good to me. Never once. They are all awful. And what's funny is I just recently was visiting a friend and they're like, "Oh, we make this amazing smoothie every morning." I'm like, "Yeah, sure I'll try it." They're like, "Oh, we put this protein powder in." And I was like, "We'll see about that." And I had one sip and I was just like, "Yeah, that's a no for me." You know? They just gave me a little bit, but I was like, "I have a hard line for myself. I do not eat things that don't taste good. That doesn't taste good to me. I'm glad you love it. It's not for me, thanks. I'm not going to have that.'"

Stephanie Dailey: Oh, listen, it was eye opening. And I would say this, I am an internist. I specialized in nephrology, but I'm board-certified internist. I mean, I'm who is supposed to be the person who knows how to lose weight and eat healthy. And not only that, but in my personal life I had tried every major diet program out there. And I can tell you 100%, everything I knew was really wrong. And I knew it was wrong because it wasn't working and I'm not bucking conventional medicine by any means. But the reality is we as physicians tell people, "Oh, eat less, exercise more, get in your calorie deficit and you'll lose weight," but the reality is... I think we're up to 85% of Americans are overweight now, right? It's not working.

Katrina Ubell: It's not working. We have so much evidence that that doesn't work, yet it's still like, no, no, no, this is what you have to do. And on top of that, really the messaging, I mean, we don't typically say this, but the underlying sub message is this is the solution, if you can't follow that or get results with that, it's your fault. I think I've talked about this one time before in the podcast, but my husband is also a doctor. When we were in medical school together, I don't know, he must have been on... I don't know what services he was on. It was probably internal medicine or something like that. But he rotated through an obesity clinic. And this was many years ago, this is over 20 years ago.

There's a woman who came in and had her whole list, her whole food journal and everything she ate and she hadn't lost weight. And they left and the doctor, the attending said to my husband, "She's got to be lying. If she's really eating that, she should be losing weight. And so clearly she's lying." Right? It's like, "Oh my God, does my heart hurt for everyone involved in that situation," right? That is the messaging, is obviously you're doing something wrong. When else do we blame patients for what they're struggling with? Obviously this child is doing something wrong because they have strep throat. No, this just happens. It's not your fault.

It's just such an interesting scenario that's been created around this. It's morality of like you're a good person if you're thin and you're able to lose weight and keep it off. And if not, I mean, something bad about you. And all of that is just nonsense and it doesn't make any sense. Instead of just going like, "You know what? I seem to be struggling." I mean, anything else, any other medical problem where we're like, "Our failure rate is extremely high," we'd be like, "Maybe we need to think about something different," right?

And instead we're like, "You know what? I think making the stomach smaller is going to be the answer," which might be one answer for some people, but it's not going to be the end. We just have to get more creative and open our minds to other ways of approaching this to solve the problem. Being more open to the non-tangible medical things like emotions, like how you feel.

Stephanie Dailey: And that is the reason why I was so excited to share here. I am not the person that's like, "Hey, everybody, look at me, listen to my story at all." But I had so much shame. I thought one of two things, I really thought my body was broken. There's something weird that my body does not follow the standard roles initially. And then when I found your program and I was like, "Oh, I'm just doing it wrong." I'm like, "I'm not going to have shame in this because if I'm a board-certified internal medicine doctor and a lifelong member, I will never be back to those diet programs." But I have signed up and learned from the probably three biggest weight loss programs in America. I've had nutritionist at gyms. I'm an avid runner and I was doing it wrong. I'm sure other people are doing it wrong. And I'm not going to have shame in that, right? I'm not going to have shame in it.

Katrina Ubell: If anything, it's like once you figure out a solution, you're like, "Listen, people, you need to know about this. There's another way." That's how I thought. I could easily just kept this to myself and just been like, "Well, I've sorted out for myself. Great." But I'm like, "I have a feeling there's other people though who are struggling like I did. And they would like this information. They're out there searching just like I was." So thank you for coming on and sharing it. I really do appreciate that so much.

So as you got into everything, were you surprised to find out like, "Oh, this really isn't so much about the food"? I mean, it is in the sense that there's certain ways of being that support you, but once that was dialed in, the weight was falling off, what were you discovering about other things you wanted to work through?

Stephanie Dailey: So I always thought I ate because food was good.

Katrina Ubell: Right. 100% right there with you. I just like food. That was my thing.

Stephanie Dailey: This is what I thought, like, "Okay, so when I eat food that tastes good, it's calorie dense, I'm going to gain weight. So then the next month I have to go in whatever diet program and get it off." And so obviously I learned so many things in your program, but that was the biggest thing, was the hunger scale, the hunger scale and the emotions, right? So, oh, I was eating for every emotion. I was eating for every feeling. I'm tired, I'm exhausted, and I was turning to food for that. And so really dialing in and doing things like I remember I did when I did a joy eat and I sat down with this food that I had really built up in my mind. And as I ate it, I did my worksheet and just realizing... Just separating that out and putting on paper my feelings and reason for eating that, I will never forget that moment.

I had never done that before. Any other time that I had had dessert or something I enjoyed, it was in a party setting and just, "Oh my gosh, this is so amazing. It's so good." And then waking up the next morning, "Ugh, what did I do to myself?" I'm miserable, get on the scales. I feel sick at my stomach. "Why did I have the third serving, whatever." And so just really dialing into why I was eating was so eye opening. I'd never done that, because every other diet program I had taught was like, "Oh, if you have the urge to eat, look, have another shake, it's only 100 calories. Fill your tank, make your stomach full." It's miserable. And then you have a new feeling or eat the zero point foods.

I was never taught to eat for hunger. And so just doing your program, doing the modules where I said, "Oh, I have the urge to eat. This is an urge, this is not hunger," really dialing in the difference between urge and hunger and working through urges was definitely one of the most profound things that I have learned in my life.

Katrina Ubell: Yeah. Amazing. Oh my gosh, right? It is. It's everything. What I love is the messages have always been there. We just got disconnected from them. We used to listen to them when we were little and then somewhere along the line we got separated from them. So it's not like, oh, you need to get your body to do anything, it's already doing it. What you have to learn is how to reconnect and interpret the messages. And there's the information. Remember back in my day, oh my God, when I first started weight watchers there was a little cardboard, slider thing that you used to figure out your points.

I'd go into the grocery store and try to be slime, figure out how many points the serving was for something. Now it's obviously just an app on your phone, but back in the day... Doing all that, you don't need that to help you figure out when you should stop eating, when you should start eating. Yeah. It's such a relief, I feel like, don't you think? It's such a relief to know that you already have that in you.

Stephanie Dailey: Yes. It was such a relief to know that my body was not broken. I had just been conditioned for things that didn't serve me.

Katrina Ubell: Yes. And just like you can be conditioned, you can be deconditioned, which is the best news ever. I always love saying that. And like we all know Pavlov conditioned his dogs to drool and then he deconditioned them. It's not like, "Oh, he did that and that was the end of it," right? It's like, we are malleable in our brains. We are capable of doing this, which is so cool. So, so cool. So as you've been going through the program, there are a couple different areas that you've really delved into personally.

And I think that that's something that we sometimes we're like, "How do those things relate?" Our personal stuff and our food, how do they.... They're separate things we think, but they're not at all, right? Because we eat because of the stressors and the issues that we have going on. So of course we have to work through those as well. So I would love it if you would share one of the things that you really delved into, made major progress on.

Stephanie Dailey: So the first thing I dove on in my work was my relationship with my teenage daughter. And I spent so much of my one-on-one coaching really dialing in my relationship with her. And I did it because I wasn't showing up the way I wanted to. The biggest thing I learned, the biggest thing I learned, she was the first person that I did what you call the model on, like how do you expect her to work or how do you expect her to act? What's your foot model for her? And—

Katrina Ubell: You mean your rule book? What the rules are. What you think that she should be doing, right? Okay.

Stephanie Dailey: Yes. Yes. And I had a big, long list and then just acknowledging I don't have control over her. I can only show up as me. So this is a funny story, but I'll use this example, was the mess of her room. So the norm before I did your program, whether it was first thing in the morning or when she got home from school, I was like, "Your room, there's trash, there's wet towels, there's clothes." I really flustered her a lot, a whole lot. And then I decided after doing that all work, I was like, "It's not a priority for her to have a clean room. So I'm going to give her some set defined guidelines." I actually wrote them out for her. And I just said, "These are the things that I care about, is that you don't put a wet towel on the floor because it can grow mold. And I care that you don't leave food in your room, because we can get ants. And if you will keep your dirty dishes in the kitchen and you will pick up wet towels, however else you choose to live in your room, let's go with, if you can just do these two things." I literally wrote it out for her. And she was like, "Oh, well, I can do that." And I just explained to her, I said, "I don't want us fighting about your room. It's not worth that to me."

A couple weeks later I asked her, I said, "I'm off on Tuesdays, would you enjoy if I cleaned your room on Tuesdays while you're gone to school?" And she was like, "I would love that." And so I on Tuesdays I clean her room and I so enjoy it. I feel close to her, even though she's not here. She's off at school and every Tuesday... She told me a while back, she's like, "Tuesdays are my favorite days." And I was like, "Oh, I love this." And I would just share that now at night I go in her room and I lay down with her at the end of the day and we talk about everything and we laugh and I had lost all of that. I had totally lost that connection with her and that time with her, because I was so busy nitpicking her room.

And I just made a conscious decision. I was like, "You know what? If she grows up and she leaves this house and she doesn't know how to clean and she doesn't know how to do laundry, so be it. She can figure it out on her own." But she will leave this house knowing or me sharing that mom showed up the way I wanted to. I was in control of my actions. I was in control of my mood and I was coming the way I wanted to show up. That's how I would say that.

Katrina Ubell: And what I love about that is some people will be like, "What? She needs to know how to clean a toilet. She needs to know how to dust and vacuum." And what I think is she can learn that anywhere. But when she's in your home, is the only chance that she'll have to experience true unconditional love on a regular basis from her mother. That is not something that you can farm out. We all knew kids who showed up at college, didn't know how to do their laundry. It's okay, they figured it out. It's not like they didn't learn. You know what I mean? They figured it out. And I think some people might be like, "Well, great. So then now I'm going in there once a week to clean the room."

But the reason why you were going in there is because you wanted to. You like the experience of it. It's for you. It's not even really for her because she didn't care. It's not her issue, right? It's not important to her, but it's important to you. And the way you're saying, you're like you feel close, you feel connected, you are around her stuff and you get to have the room the way you want it at the end, which I just absolutely love. And I do just want to point out for anyone listening who's like, "Well, hell no, I'm not going to be doing that." Also you could have chosen to just shut the door and not do that. You don't have to clean it, but you also don't have to be mad about it, right?

And I love how you have some basic ground rules, right? We can't have mold. We can't be rotting the house out. We can't have an animal infestation. Outside of that, some dust is some dust. What are we going to do? We're going to just let it go and I'm not going to be mad. I'm not going to sacrifice our relationship over that. Because if the nagging was going to work, if all she needed was encouragement, she would've been doing it already, right?

Stephanie Dailey: Yeah.

Katrina Ubell: Yes. Yeah. What I love about that is so often I hear people saying like, "Oh, teenagers are the worst. Just wait, it's the worst time." And I just don't think that it has to be that way. I like to just think of that's conventional wisdom and I don't know that thinking that way serves anybody, right? It's almost like we need to get mad at them so that we're not so sad about them leaving. You know what I mean? You can also just love them and let them leave because that's a natural progression. We don't have to feel like we're all at odds and we can't stand it one second longer to make it okay that they separate out and become fully functioning adults on their own.

Stephanie Dailey: Right. And it's really helped me. One of the things like I said, I've spent my one-on-one coaching and I also journal about it and I journal and I plan ahead how I'm going to show up because my daughter's a full-on teenager. There are days she gets in the car and I'm just like, "Oh," because she's sharing negative thoughts or she's annoyed in her words and all these things. And I'm like, "You know what? I don't have to have any of those feelings with her.

I can just have compassion. And I am going to do my thought work ahead of time so that when she comes in the car and she's using me as her thought dump and I can just be there with compassion and love and let her get it all out. And I don't have to feel bad. I don't have to feel annoyed. I just get to be me with compassion and love and let her know this is a safe place. And I love what you said about just showing unconditional love. You can get in mom's car and you can be mad or angry, frustrated, throw your books in the floor, whatever and mom's just going to be here with love.

Katrina Ubell: Yeah. And I think that that is when you think about the experience you want your children to have, right? And so many of us didn't experience that, right? The love we felt, whether it was or wasn't, we felt like that love was conditional from whoever raised us or whatever. It's so amazing to be able to just know however she receives it, she receives it, but I know that this is how I showed up and that I can be proud of, versus going, she needs to be this certain way so that I can be proud of how I'm parenting, how I'm mothering, right? It's a way for you to be able to control what you can control and stop trying to control that which you cannot control.

It's like getting in your own lane and letting another human being live their life and have their experience, which is yeah, sometimes the hardest thing. I mean, we coach on that quite a bit, right? And all the way from toddlers to adult children and everything in between. So yeah. And if it's not that, then it's like we have rules for everybody in our lives, like how our sisters should be and our aging parents and our friends and the people we work with and our patients and all of it. So yeah.

I would love for you to talk a little bit more about work too, because you were saying when you came into the program you were ready to quit. And I think a lot of people were. I don't know if this was already in the work significantly for you before COVID hit, or if COVID put you over the line. But I think a lot of doctors have been like, "I don't know if I can do this anymore."

Stephanie Dailey: It had been in the works for a long time. It had been 10 plus years since I enjoyed my job. And yeah. And I will tell you, it's hard to not get teary at. I'm like, "Wait, I wanted this job from the time I was five years old. I went to school for 15 years after high school to have this job," right? I'm so mentally confused here. Why do I dislike it so much? So again, I did my work on my work and I really worked on my dread and in my thought work. And this is not actioning myself out of anything, but in my work I realized that I was going to clinic for a seven-hour clinic, my office. I go to the hospital in the morning and I have office 10:00 to 4:00, which goes to 5:00 because you always run it over.

And I was going to office and I was so afraid of being behind. And I was so afraid of not pleasing patients that I didn't drink water. I did not go to the bathroom. I did not take a lunch break. And when I really started looking at that, I was like, "Well, no wonder my body does not want to take me to work. It's going to be treated very poorly for the next seven hours." I would dread it too, who wouldn't? "Okay. We're going to put you in this tank and we're going to time you on a clock and you've got to go, go, go, go, go. And any personal needs you have, you don't get to address." Well, everybody would be miserable, right?

Katrina Ubell: And meanwhile you're trying to get other people to be happy, which is impossible.

Stephanie Dailey: Right? Yeah. So the biggest things I did with that was I worked on the thought that I'm worth waiting for. I never

Katrina Ubell: I love that one. I love that one.

Stephanie Dailey: I know. I am never more than an hour behind. I mean, that's an extreme day. Most days I'm 30, 20, 30 minutes behind and in an extreme day would be an hour behind. And in some of my work I was like, "You know what? If I had a complex heart condition and I had waited three months to get in to see this special cardiologist and I had to wait an hour, I wouldn't bat an eye. I would be thankful to be there. And like it's finally my turn." So what I did was I quit apologizing at work if I was late. If I go in a room and somebody says, "My appointment was at 12:30 and it's 1:00," I'm like, "Oh, yeah, it's 1:00, well, how's your blood pressure been doing?" It's a fact, right?

Katrina Ubell: Yeah.

Stephanie Dailey: And it's so funny, the other thing I did and... I started your program a year and a half ago, was I just offered my patients that were unhappy with me, I said, "You know what? We may not be a fit. I have a list of 30 other nephrologists in the city. Louisville has tons of kidney doctors, here's the list. I want you happy with your physician and I'm okay if it's not me." And I will tell you, I only did that to three people. I think one of them chose another doctor, but two of them are now my best patients ever. One wrote me an apology letter, how appreciative he was for me.

And I just said, "I work in an environment where I take care of sick people and my work is not predictable. And when someone sick comes in, I give them my attention. And that may mean I'm late. And if I'm not the doctor for you that's okay." And I had never looked at work that way. I had always looked at it as I was doing something wrong. I should be better with my time management. How have I failed? My patients don't like me. I had all of these thoughts running through my mind that made me not enjoy work. And when I really broke it down, I was like, "I'm letting two or three bad apples ruin the bunch." Right?

If I quit work, then hundreds and hundreds of patients are without a doctor. If I give a letter that I've typed up to three patients that don't seem to enjoy our interaction, okay, now I have 997 patients and whatever, right? But if I quit, then there's 1,000 people looking for a doctor. Yes. And I don't know my exact patient number, but I just use that as an example.

Katrina Ubell: Yeah. For example. Yeah.

Stephanie Dailey: But just doing that work just so changed things. And then I've also done fun things at work. And I love where you say, "Let me back up and say this, I'm not actioning my way out of any of my thoughts, but I do choose things that make my thought work easier." So I make sure every day when I go to work... I love ice. So I take two big mugs of ice so I can refill my water and have cold water. And I take mugs that are from vacations or fun times just because they bring me joy. Just to look at them and be reminded of meaningful times in my life brings me joy. The other thing was I swapped out my clocks from the white and black stucky hospital clocks that you see in office. And I got pretty clocks.

Katrina Ubell: Right. You're just looking at the time all the time. I just want to look at something pretty. Actually that's just bringing innate pleasure into your day. Who says that work has to be so uncomfortable and difficult and... Right? You can look at whatever clocks you want to, have a fun cup to drink out of. Why not? It's amazing.

Stephanie Dailey: Yeah. And so that dread is just... It is gone. It is so, so gone. And now I see it's interesting how my brain worked, because before I had all these thoughts that I wasn't good enough or wasn't pleasing people. And now that my thoughts are different, I see all the patients that thank me when I'm looking through it with a different lens. And I'm not doing it for their gratification, but just the fact that I see that now. I see the people that say, "You make a difference. I'm better."

Or they come in and say, "Oh, you don't know my uncle. You probably didn't know whoever was my uncle, but he was in the hospital and you saved his life. And I'm like, "Ah." And I'm in a better place now where I can let those thoughts come in and really resonate with me because I was in a place before when someone offered those thoughts, I had a wall up, "No, I'm 30 minutes behind. I'm all of these negative." And now I'm like

Katrina Ubell: Oh, they're just being nice. They feel like they have to say that. But what that all comes down to is allowing yourself to have a positive opinion about yourself. When you have a negative opinion about yourself, when your self worth is low, then other people offer you kind words, then you're not able to hear it, because you're like, "No, they don't really know the truth about me." When you do that work to go, "No, you know what? I myself I'm valuable. And what I do is of great value," then they are letting you know that they found it valuable too. And you're like, "Yeah, I agree. Isn't that awesome? Thanks for letting me know."

It's like you're able to let it land and able to sit with it versus this constant like, "No, the way I get to feel good is when I'm always on time and everyone's happy with me and all these things that are just clean impossible." It's just not possible to create that experience. And it's exhausting as you're trying to do it, when men we're in full-on burnout, feeling like we're not making a difference, it's awful every single day, feel like we're failing all the time, I mean, why would you want to continue if that's your experience of it?

Stephanie Dailey: Right. And that was one of the things that you had shared with us at some point, was you said, "Whatever you believe, your brain is going to find evidence to support that belief." So when I had the beliefs that I wasn't good with time management, I wasn't an adequate physician, I wasn't keeping up, when I had those beliefs about me, I just spent my day finding evidence for those beliefs. And now that I truly believe I'm an enough, I did the work. And another thing we talked about was what's your minimum.

Okay, I'm board-certified. I stay up on CMEs. I'm going to read one journal a month, right? I'm never going to know everything about my field, never. But if I do these things, if I keep up my board certification, I keep up my CME and I read my one nephrology journal a month, that's enough. That's enough. That's the doctor I am. And so just having that self worth and just knowing, I don't have to read every journal out there. And that sounds so silly now looking back. Why did I ever put all of that on me? Right? Why?

Katrina Ubell: But it comes from a lack of self sufficiency, right? You're not enough. So therefore you need to know more, right? You don't know enough, so reading one journal isn't enough, reading five journals isn't enough, reading 25 journals isn't enough because you're not enough, right? The belief makes you think that there's an amount that will make you feel differently, but it's not, right? It's like you have to just decide this is what I offer and it is enough. This is what I make sure I do because I feel like that keeps me where I want to be in terms of knowledge and quality of care. And anything besides that is a bonus not required. I don't have to do that. And I know that I'm able to offer something of value. And this is so common, right?

We coach on this all the time, this idea that I just feel like I don't know enough, all these other people are more experienced. If it's not knowledge, right? Fond of knowledge, then it's experience. And then the more experienced you are, then you have complications, right? Mistakes get made, or just things don't work out the way you'd hope they would and then you can use that against yourself. It's you will never know enough or have enough experiences for you to finally feel like you're enough. It is a decision. It's not an amount of anything. And that's what you've done here.

This is such a great example where you've just decided like, "What I offer is of great value. I believe in what I offer. And to be able to keep up that quality, these are the things that I do. And that is enough. I don't have to be constantly striving for this level of perfection that's unattainable and makes me miserable in my attempt to achieve it."

Stephanie Dailey: Right. It's so true. And I'm just so thankful that I enjoy it. Like I said, nothing really changed at work other than I have my water, which I really

Katrina Ubell: You drink now that you so go to the bathroom.

Stephanie Dailey: I know, right? Right. Which is funny because I lecture all day long to my patients about drinking the right amount water, right?

Katrina Ubell: Right. You're a nephrologist. The irony. I miss that. That's good.

Stephanie Dailey: Yes. Yes. And I'm like, "Oh." And it's been like

Katrina Ubell: You of all people, right?

Stephanie Dailey: Yeah. Oh, no. And it's been great for me to share that with my patients like, "Look, this is what I do. Do this to get your water in." I give them great tips.

Katrina Ubell: Yeah. I'm sure. I'm sure. And enjoying your work is allowed. Sometimes we have this idea that it's work and it's got to feel like work. Or you can also figure out a way to enjoy it since you're spending a good chunk of your life there. It is okay to figure out ways to make it fun, pleasurable, pleasant, enjoyable, whatever it is that you want it to be, fun. And maybe just a little letting yourself have a little fun banter with patients from time to time, certain ones who are open to that. Letting yourself find the enjoyment in it is what makes it something that you can do long term. Why would you want to slog away in the suffer fest for decades? Of course you're going to be at a certain point going, "I don't think I can do this anymore. I got to figure out some other thing."

But what we think is that doing something else is going to be the ticket that's going to make us feel the way we want to feel. And it won't, right? Because if you don't think you're enough there, you're going to think you're not enough in other places too no matter what you decide to do. What I always say, get happy with where you are now and then decide if you want to do something else. Just because you want to do something else, that is okay to do something else, but not because you're trying to escape the experience that you're creating yourself.

Stephanie Dailey: And I'm so glad you touched on something that's been really important to me in this program. And that is enjoying work because I take care of very sick people and I take care of people that are at the end of their life. And I take care of people that are dying. And I have a lot of internal guilt like, how can I go to work and this be fun for me?" Right? How can I enjoy this when others are suffering? Right? And through your program that is one of the things I've really worked on with my one-on-one coaching, is really just getting into my brain, this is their illness. This is their life. These are not things that I have given them or wished upon them. But what I can do is if I'm happy with me, then I show up as my best and I give them my best. And isn't that what they want?

Katrina Ubell: Yes. You can be like a ray of light in their day, right? And remembering that there's no amount of suffering that you can do personally that will relieve the suffering that they're experiencing, right? You feeling worse does not relieve their suffering. So then what is the point? That's pointless suffering then, right? There's enough things to be suffering through in life as a human in this world. We don't need to add to it thinking that somehow that's going to help them. Such a perspective shift.

Stephanie Dailey: Yeah. And I came back to my self worth, right? Working on the fact that I'm worthy of my health and this body that I get to live in, regardless of what's going on with other people and their bodies.

Katrina Ubell: Right. Right. You get to take care of your kidneys and other people's kidneys.

Stephanie Dailey: Right. Exactly. Exactly.

Katrina Ubell: You're so good. Oh my gosh, thank you for sharing those. Those are just such great, great examples. I would love it if you just had any final comments or final takeaways, if you could share those. I mean, you really were the person who was like, "I don't know what this is, but I'm doing it." So I love that because it's just totally ... you're like, "I didn't even know what I was going to find, but this is what I found." So I'd love for you to share that.

Stephanie Dailey: I think I cannot say enough to not have shame, not feel bad. To anybody else's who is where I was when I started, your body is not broken. You have been taught things that don't serve you, and this is a new way to do it. And the biggest thing that I would say from coming in not knowing what I was getting into, now obviously you're the only coaching program I've ever done, now that I've done it, I've talked to people that have been coached and had things is that your program is really a whole life program. And I'm not just saying this because I'm to you on you, talking to you directly, but it is phenomenal what you've created. I cannot thank you enough.

I mean, the one-on-one coaching has definitely changed my life, but the program, I don't know if everybody realizes what your program.... Maybe they do, but I didn't. I worked through everything in this program.

I did finances. I did my spiritual belief. I did my relationship with my husband. I mean, every aspect of my life has been touched on with the information that you've given me in your program and has been improved. I mean, absolutely everything. And I'll just say this, I remember this one time... You say all the time on the group coaching calls, "Listen, dial in. How does this affect you?" And I'll just give one quick example. There was a night where somebody was trying to decide to have another baby or not. If she wanted to attempt a pregnancy and I started to tune out, I'm like, "I have five kids. This isn't me."

Katrina Ubell: You're like, "I'm done. That ship has sailed."

Stephanie Dailey: That has sailed. And I just listened. I'm like, "What Katrina says, to listen and relate it to your life, so I'm going to do it." Literally I said that to myself like, "How does this relate?" It was a great coaching call on decision making. And my husband and I were in the middle of trying to make a financial commitment for a decision we were making and it so helped me. It so helped me with making that decision, not looking back, feeling confident with that. And that is nothing that I would've ever brought to my one-on-one coaching, right? Nothing. I would've never been like, "Hey, Emma, tell me how to make this financial decision."

But I learned so much in that coaching call. It really helped me and honestly, my husband too, because I went back and I was like, "I have these thoughts. Let's play it out like this." We made a good decision and we didn't look back. And we were proud of that decision. We were proud of where we came from with it. So just the fact how encompassing the program is with the one-on-one, with the grouping coaching, with the modules, with the information, it touches every aspect of your life. If you want to really show up the way you want to show up, this is the way to do it. And I admit, I didn't know how to do it.

Katrina Ubell: I want to just point out though that the reason that's all in there is because we think the weight is just about food, right? We think it's just this one little corner of our lives, but everything else in our lives is coming in through this funnel of eating and food and maybe alcohol for some people. Right? And so it's like if we want to really permanently not rely on food anymore, we have to explore all those dusty cobwebby corners with all the little different things. Not that it's like, "Oh, I've got 45 different problems and I have to spend all this time on all of them." But it's more just exploring how are these different patterns?

Usually we're doing the same thing in multiple areas of our lives. So it's like you work on one core issue and it solves a lot of problems for you, but working through all of that, improving all of that, makes it so you don't need to rely so much on food. Your brain isn't like, "Well, this sucks really bad. I know the answer, it's in the freezer, in the form of ice cream or whatever it is," right? You know how to actually work through it when things are hard and you get to enjoy the fruits of your labor for working through all of that, for sure. And I love how you said that, right? Should I have a baby or not? There's plenty of people who are like, "I am not in that position to make that decision." But it's not even about the baby or not the baby, it's making the decision.

How do you make a decision when you're not sure, when you really could go either way, when you feel like you're being pulled equally in both directions. And that's why I say that. Every time I'm like, "I'm telling you there's gold in here. You just got to be looking for it. You got to figure out how to apply it to your life."

And that's what I think makes group coaching so powerful, right? In our program you're getting the one-on-one help that you need. And you're learning for other people on issues that you would never even think to bring, exactly like what you said. Yeah. That's so amazing. And what's funny is we haven't even talked about the fact that you lost 35 pounds.

Stephanie Dailey: Right. Yeah.

Katrina Ubell: Out of the way.

Stephanie Dailey: It's out of the way. That happens. That happens, yeah. And I'll say this too, I'm so excited. I still have 15, 20 pounds to go to get to goal. And when I offered to do the podcast, I was like, "I'm not at goal." And then I remember you at some point saying you started coaching before you were at goal and I was like, "Oh, okay, I can do this." But where I am is such a different place because I know my weight is still coming off. I know that goal weight is there and I just have love and compassion. I'm just going to show up for my body, give it what it needs, follow my protocol, stick to my plan, and my body's going to let go of this weight. Maybe it's over the next year. Maybe it's the next six months. It can let go of it whenever it wants. I'll be happy and grateful if it's in six months from now or a year from now, it's my Amazon package that's in the mail.

Katrina Ubell: Right. Exactly. Exactly. Totally. Totally. And I think that's the best way to approach it, right? If we're so focused on in the food and everything, it's like... I'm always like, "No, what you need to do is stop emotionally eating." So yeah, you need to make sure that you're following your plan, but also where are you still using food to make yourself feel better? Where are you not willing to feel? Where are you still not really connected with yourself and supporting yourself? And maybe that's not getting enough sleep and staying up too late sometimes or whatever. Those are the things that we have to work through.

And you know what I'm always saying, I'm like, listen, I don't care what you weigh at all. Literally doesn't matter to me at all, but what I care about is that you finish the process of learning how to not emotionally eat and then you can just decide what you want to weigh. Right? You can weigh any number you want because you know how to create that in your body and you know how to maintain it because you're not using food in that way. You might decide you want to come back to this weight because you just want to be able to have some more exceptions more often. Totally fine. Amazing. But you're not just at the end of the day eating the stale donuts out of the break room because God you spend seven hours and you haven't sat down for a second, let alone go to the bathroom and this is your only relief. That's the part that we need to make sure is no longer there. And then you just decide what you want to weigh. Yeah.

Stephanie Dailey: And that's the biggest gift I think... And I would say this having gone through the program, the gift that I've given myself... I would totally attribute that to you, but your program taught me to give myself this gift, but that is control over my decision making. And I was not in control before. I was not in control. I had whatever emotion and I would wake up that morning and say, "I'm not going to eat bad food," and then sure lo and behold, I'm in a drive through getting bad food. I was not in control of that before this program. And now I'm like, "I know how my brain works. I know how to serve it. I know what it needs when it sends me those urges and those feelings." I just feel like I know how my brain works and I didn't really know that before.

Katrina Ubell: Right. Exactly. It's like once you understand it, then you can work with it instead of this constant back and forth of like, "Oh, see, I went through the drive-through again and I'm awful and I'm never going to figure this out." And just the whole cycle again and again. I mean, anyone who struggled their way understands that hamster wheel of urge, desire, "Ah, I just really want this thing. Live a little. It's okay. After the day I had, it's okay to eat this," and then feeling awful and then pledging to do better and swearing and promising yourself you won't do it anymore and then doing it again.

And what that does to your thoughts about yourself, your relationship with yourself, it all ties together. And like you were saying with your confidence and your self worth at work, when you do that work to improve your opinion of yourself, that helps in every area including with your eating and your weight, because you're like, "Yeah, you know what? I am worth sorting this out. I'm not so worthless that it's not even worth my time and effort to figure this out or sort out what's going on for me. I might as well just eat because I don't deserve nice things or to have what I want in life or whatever those thoughts are." Right?

It's like it's all woven together in my mind, right? It's our experience of our lives. And what we eat and weigh and everything, they're all interrelated. And so that is why we touch on everything, which is a good thing. And I think so often people have come into the program, had great success, they're like, "I was just here for the weight loss, but I didn't realize all these other things," who have become so much better in the process. In my mind I'm like, "They have to come together." Because you can lose weight on your own in a million different ways, but you'll just gain it back if you don't do that other work on your life and really sorting things out. So I love that.

Stephanie, thank you so much for coming on and sharing all of this and just being so honest. That's me. I'm always like, "Listen, I'll just tell you how it is." And you are exactly the same way, that you're just like, "Listen, you just need to know this is how it is." So I really appreciate you just coming on and sharing the story. I know it's going to be inspiring to so many people.

Stephanie Dailey: Well, awesome. Thank you. Thank you. Thank you.