

Contents

Proem 1

Introducing Dr. Robyn Tiger 01:05 1

A complex case physical, mental, spiritual 02:56..... 2

The practice of Lifestyle Medicine 06:09 2

Eureka 09:00 3

Manage manageable stress 09:50..... 3

Forming good habits 12:19 4

Should, why, how 14:33 4

Burnout among family caregivers 16:40 5

Accessing Lifestyle Medicine 18:52 5

Getting to how 22:21 6

Burnout – personal and system issues 23:46 6

Global celebration 24:18 7

Reflection 26:28 7

Proem

On the second day of my first management gig as nurse manager of an ICU, I noticed that staff nurses seldom took breaks (bathroom or meal). Surprised that this would be the reason for my first impromptu staff meeting, I was astounded to learn about the resulting high incidence of bladder infections. “We are smart people. We can figure out how to design workflow, so everyone gets breaks.” So, 1987, my first awareness of burnout. No breaks, ill health, and stress all lead to burnout. Today, in COVID-world, the epidemic of burnout among healthcare workers appears in high relief. Not new, but in the headlines.

Introducing Dr. Robyn Tiger 01:05

I met today’s guest, Dr. Robyn Tiger, through Kelly Freeman and Alex Branch at the [American College of Lifestyle Medicine](https://www.health-hats.com). I met Kelly because of my interest in the science of healthy habit formation and the reduction of burnout among clinicians and family caregivers. Robyn Tiger, MD, is on a mission to empower physicians with self-care tools backed by science and research. With physician burnout on the rise, Robyn knows firsthand what it’s like to love your job while coping with stress, anxiety, imbalance, and even illness. Robyn, Dr. Tiger, is the lead faculty and subject matter expert in stress management for the American College of Lifestyle Medicine. Robyn is currently editing and creating the new board review materials for the 2023 certification exam.

We started our conversation by learning about Robyn’s journey to Lifestyle Medicine.



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A complex case physical, mental, spiritual 02:56

Robyn Tiger: My medical profession is diagnostic radiology. I'm a board-certified fellowship-trained diagnostic radiologist and went into medicine starry-eyed like most of us healthcare professionals. I still think it's an amazing field to be in. But about ten years in, I became known as a complex case. I know you're a healthcare professional as well. We know that being complex cases isn't something we want to be ourselves. We love to figure them out cause our brains love to figure them out. But I had many things going on that no one could understand, and they seemed very disconnected. There were symptoms such as migraine headaches with intractable vomiting. I had vertigo and, tinnitus, bleeding gums, and reflux. My whole body hurt. I couldn't move. I describe it as a feeling like the Tin Man from the Wizard of Oz. Just ugh, I just couldn't move. And I had a very scary symptom, which was intermittent paresthesia. So, for the non-healthcare professionals listening, that's numbness and pain that would occur intermittently in my hands, feet, and the left side of my back. And that would happen when I'm driving my car, and I can't feel the steering wheel, or I would be cutting up vegetables for salad, and I lose the sensation of the knife, or I would be doing a breast biopsy, and I couldn't feel the biopsy gun in my hand.

So that's all the physical stuff that was going on. And then, of course, there was the stress, the anxiety, the lack of sleep, the exhaustion, and all the mental stuff happening in my brain, which got dark and scary. It made me wonder if I even wanted to be here anymore. So that's my complex case in a package. And I saw lots of docs, and they gave me lots of pills. We say pill for an ill, right? I had a pill for every symptom. Every doctor I went to gave me a pill and lots of imaging studies because I'm a radiologist.

Everything was negative, and I wasn't getting better. I was seeing a psychologist. I was working on my mental health. That wasn't getting any better either. And at this time, Danny, I had three physician colleagues who had died from suicide, and nobody was talking about this stuff. I thought I was all alone, and I was really scared. And I said, oh my gosh, I've got this amazing husband. I've got these great little kids, and I am heading down the path of my colleagues. What am I going to do? These pills aren't working. The therapist isn't helping; I'm just circling the drain. And it was then that I just decided I needed to try and figure out what was going on for myself. And that was what I did. I started to look outside Western medicine, which was when I began to recognize what was going on with me.

The practice of Lifestyle Medicine 06:09

Health Hats: Okay. So, before this, I had not heard of Lifestyle Medicine. I'm a user of chiropractic, acupuncture, and massage. They're part of all part of my practice, stress reduction. But never as coherent. That's not the right word. Do you know what I mean? All together in a practice, in a field. Is it relatively new?

Robyn Tiger: No, it was relatively new. Yes, as an actual organization, it started in 2004. Interest in Lifestyle Medicine started way before that. And when I found them, I found my people like, wow, these people get me. I'm doing everything that they're recommending. Going back to my story, when I realized what was going on and I could help myself, it was my ability to relieve all the symptoms I described to you. I was relieving my stress. And we can talk about that in a bit, but that is one of the six pillars of



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lifestyle medicine. The other five pillars, the focus, the other six pillars, one of which is stress management or nutrition, which is a whole food plant-based diet getting restorative sleep. Fitness. Having wonderful, supportive relationships and abstaining from damaging substances as much as possible, over-drinking tobacco, drugs, things like that. And so, to go backward in my life to answer your earlier question.

Eureka 09:00

I'm going to take you back to anatomy lab in first-year medical school. Okay. So here I am over my cadaver, and I felt a sharp pain in my finger. And I looked down, and my glove was sliced open, and there was a scratch on my skin, and I realized that the plaque had cut my glove in the aorta of my cadaver. Wow. I don't like it, what is that? What the heck am I looking at it? What's going on here? And I came to understand that it was an atherosclerotic plaque formed by what we put in our bodies. Most of the time, people sometimes have familiar diseases, but most of the time, plaque buildup is caused by what we put in our mouth and the stress that causes all these increased fats and sugars and things to be mobilized in our bodies. My first aha moment was cutting my glove in the anatomy lab on my cadaver and seeing how narrow that aorta, that major artery in our body, became. And recognizing that blood couldn't get to where it needed to when that plaque was blocking it.

Health Hats: It wasn't soft. It was hard.

Robyn Tiger: It was hard. And it was, this is a cadaver. So, we know there are different kinds of plaque on the soft plaque, the heart plaque, and different things like that. But just the fact that I had this realization. And this is what it was, and it cut my glove and scratched my finger. And this is inside our bodies when we don't eat properly. Yeah. So that was my first.

Manage manageable stress 09:50

Health Hats: I have a son who passed away quite a while ago, 16, 17 years ago. And today's his birthday. I went to a grief counselor when he was dying. The grief counselor I eventually settled on spent the first 10 minutes of the hour with, "tell me about your sleep, your nutrition, your exercise, your relationships," and just like you said, so he clearly had that in mind. Then he said, when I got to the stress, he was like, so grief is stress. Grief is stress that you really, you can't manage. You have to take care of all the rest. Take care of the manageable stress so that you have the energy to deal with this grief stress, and I fell in love with the guy. This is okay. This was the third grief counselor I went to; it was the third because we didn't hit it off the first two. And but with this guy, I knew he was onto something, but again, I never really thought about that as lifestyle medicine. Still, even though he was a social worker, he was clearly onto something that could be called lifestyle medicine. Interesting. Do you, so you experienced this yourself, and now your practice is working with clinicians. If I understand with clinicians who are going through this, you're working with them and helping them navigate. Do I have that right? Are my assumptions correct?



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Robyn Tiger: Yeah. So, after I experienced what I now understand to be extreme burnout and a severe case of chronic stress, I didn't need all those pills. Mental health care professionals are amazing, but that wasn't what I needed. I needed to learn how to balance my physiology and work with my thoughts to relieve my symptoms. And then keep me as healthy as possible, including those other pillars we talked about. Having experienced it myself and having lost physician colleagues, I've made it my life's work to help other physicians do the same. And it's using these principles.

Forming good habits 12:19

Health Hats: So, using these principles is a lot of habit formation, good habit formation. And it, to me, it. In my experience in health care, it seemed that changing habits may be the most challenging thing that I feel I've come across. I'm somebody who, if it makes sense to me, I'm pretty good at developing habits and sticking with them. But of course, I have my challenges, but I find that's a challenge for many people. So how do you see that and approach that, that business of, it's one thing to intellectually get that maybe helper that I'm going to, is advising me about something it's a whole other thing to make it part of the life flow or workflow.

Robyn Tiger: Absolutely. Lifestyle Medicine focuses on the cause of symptoms rather than the symptoms themselves, which is a very different way of treating a whole person. Working at the causal level helps prevent, treat and reverse symptoms and disease. We're working at the other end of the spectrum. So right now, we have a disease management system or managing most of the chronic diseases caused by our lifestyle choices, such as hypertension or high blood pressure, diabetes, heart disease, even obesity, etc. So, we can go the other way. Suppose we can prevent and reverse and treat based on the cause. In that case, we can help people feel better, live longer, and even decrease the huge cost of healthcare in our country because over 80% of chronic disease is preventable, and over 80% of our country's costs pay for medical care is for these reasons.

Should, why, how 14:33

Robyn Tiger: So, go back to your thing about habits and how you form them, and how do you get people to do that? This education piece is essential, particularly with my population of clients. I see education in three components. One is you should do this. Two is because, and three is here's how. Doctors are methodical. We like to break things down. So, we hear a lot of you should do this, and you should do that. And blah, blah, blah. You may or may not follow that. When you add the why. And because you are going to feel better. You aren't going to prevent getting sick. You are going to reverse how you feel right now. You're going to live longer. And this is how. And then people experience, oh my gosh. I feel amazing. I haven't slept in 60 years. This is incredible. I feel so nourished. I feel like I, I don't even know. I'm clear. I'm focused. My kids think I'm cool again. I love my job again. My marriage is now saved. I get up every day excited. So, it's those three components, and we hear mostly the. Yeah, you should. You should, but not so much because of the why, and here's how, and let people experience it.

And so that has been over this last decade of my life of educating the way that I have seen people form habits. They hear you with the should they listen closer when you tell them why? And then they have



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deer in headlights eyes open when you let them experience it, and then they want more. Does that make sense?

Health Hats: It makes total sense. I think you're right that should, and a buck and a quarter, I'll buy you a Pepsi, the. Or whatever. I don't know how much Pepsi these days is.

Robyn Tiger: But we're talking about Lifestyle Medicine here. To everyone listening, we're not recommending Pepsi.

Burnout among family caregivers 16:40

Health Hats: But I'm just saying the should by itself is empty. But I hear you about the why and the how. So, your practice focuses on clinicians who are in need. In many worlds that I circulate in with patients, clinicians, and family caregivers, I can see the burnout happening with the clinicians and family caregivers. Do you think that this lifestyle medicine practice is helpful for caregivers?

Robyn Tiger: Absolutely, it's how every single one of us, every human being, should be living. We want to be the healthiest, happiest versions of ourselves. And we can't pour from empty cups. So, if you're a caregiver and don't have what to give, you can't help the people you want to help. And if you're a clinician, it's the same thing. You can teach your patients and the ones you love what you learn so that they can be the happiest, healthiest versions of themselves. The ripple effect is incredible.

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Accessing Lifestyle Medicine 18:52

Health Hats: If somebody wanted to go to a Lifestyle specialist, how would they even know if there's anybody in their community? How do clinicians, how does anybody access your services or not necessarily you, anybody in the College of Lifestyle Medicine, how would they access that? How do people access it?

Robyn Tiger: If they want to learn more about me, they can go to stressfreemd.net to reach me. If they want to learn about Lifestyle Medicine, there is a plethora of information available on the [Lifestyle Medicine website](#). There is so much information on that website. They can look up the research. They can search for a clinician. They can find a doctor in their area that will help them learn these six pillars and make these lifestyle changes.



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Health Hats: It's not so new that it's rare but in terms of the spread of clinicians?

Robyn Tiger: No, there are over 6,000 members now, and the members are doctors. They're healthcare professionals that come in many forms. There are nurses or physical therapists and nutritionists. There are hospital administrators and social workers, and psychologists. If I left you out, you are important. You are there. There are a whole plethora of individuals. They are part of this organization and even certified. Depending on who you're looking for, you should be able to find someone

Health Hats: People need to want your services to find you. So, in a way that's different maybe than your being a radiologist, radiologists, people like you get prescribed, you need a radiological exam, a test, whatever. But it seems yours is that people, and I don't know if this is because it's. It's new to me, so I'm not generalizable to anything necessarily, but do you find that people respond differently. Do you know men respond differently than women? Do older people react differently than younger people? Or is it that there's this the three-legged stool you're talking about? And that it pretty much works the same for everybody.

Robyn Tiger: Yeah, I can't generalize populations based on gender or age. If people recognize that they want help and that you can help them, it's independent of what they look like, their gender, where they're coming from, or how old they are. The beauty is that these principles are available to everyone, and they aren't hard. You just were never taught them. You just never knew. So, it's not your fault.

Getting to how 22:21

Health Hats: Yeah. Do you feel like when you look at your practice, do you feel like people get it, like drink the Kool-Aid relatively quickly, and then it's more of a matter of how? And that the work is, gets to how pretty quickly or does it take quite a bit of time or effort or whatever, to get to the, how

Robyn Tiger: I throw the how in fast, right? Because we need that how we need that experience, that experiential, when I, wherever I'm presenting, wherever I'm lecturing, whatever I'm teaching if it's my practice if it's at a hospital or an institution or at a big conference I teach by experience. They want people to feel better, and with actionable tools, they can implement right away and teach others. And so, going back to those three principles of education, there's the should, which is quick. And then there's the why because doctors need their left brains to understand the why. And I go into anatomy and physiology and research, and then I, and then we do the how, and I do that with each thing that I do. So that way, it makes sense feel it makes sense, feel it, back and forth, and you feel better quickly, right?

Burnout – personal and system issues 23:46

Health Hats: Because, oh, it's iterative, and there are early wins. And then, the early wins generate eagerness to take steps six, seven, and eight. Okay, so one last thing is that, when I look at burnout of people, there are the healthy habits, there's the individual part. And then there's the system that people are working in. And which, the time crunch, the misalignment of incentives, whatever. So how is it? Is it you know what my grief counselor was that there's stress you can manage right now. And then there's



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stress that is like harder to deal with. Like how you look at that balance between individual and system issues related to burnout.

Robyn Tiger: I do believe, just like you said, that there are two main issues here concerning our healthcare system and those who work in it. And one is the system itself, which truly is broken and needs a lot of overhauling. And some people are working on that right now. And that's not me. That's not my, that's not my wheelhouse. That's not my wheelhouse. I'm not making the rules and regulations. I know that in speaking with the chief of staff of our Surgeon General, there is a national agenda for physician wellbeing, and they are working on that. And I will be at some of the meetings that are coming up, but that second piece is the human. Right. This is where I am working very hard and very passionately. That is what I work on with my clients. So, you help. And so, how can we be the healthiest, happiest versions of ourselves independent of this broken healthcare system?

Health Hats: What should we have talked about that we haven't?

Global celebration 24:18

Robyn Tiger: What should my goodness? You and I could talk for hours on this, can't we? Yeah. As I mentioned before, I would just say that if you've never heard of this, it's not your fault. You have the innate ability to take control of your health and your happiness. You just need to learn how. Education is there. You can find so much of it on a lifestyle medicine website. I'd like to share that there's a global celebration of lifestyle summits. And coming up this month in May, when we're recording May 29th to June 4th. And it's lifestyle medicine week, and that's a global celebration of healthy behaviors where you can learn so much more about what we're talking about and the impact that the choices you make have on your health and chronic disease. And if you'd like to learn more about That website is [LMweek.org](https://www.lmweek.org). And you'll find lots of information from May 29th to June 4th. Then there's the [annual lifestyle medicine conference](https://www.lmweek.org) in Orlando this year. From November 13th to 16th. If anyone wants to learn more, there's so much information that's free to you out there for you. If anyone has any questions for me? You can find me at <https://www.stressfreemd.net/>, and I'm happy to help you and set up a free call and chat.

Health Hats: Thank you so much. I appreciate this. I have a feeling we'll talk again.

Robyn Tiger: Oh, wonderful. Thank you.

Reflection 26:28

The day after recording this episode, I had the opportunity to introduce Lifestyle Medicine and the six pillars in another gig I have, using the six pillars as a categorization scheme in measurement. Small world.



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I need to spend more time focusing on the six pillars in other parts of my work: **healthful eating, physical activity, stress management, relationships, sleep, and abstain from harmful substances.**

I appreciate Robyn's comment about the system and personal challenges related to burnout and her focus on her wheelhouse – the personal side. Deep-rooted problems can feel so intractable, overwhelming, and paralyzing. Understanding and appreciating the slice of solutions we can each handle feels critical. What a shame it would be to burnout addressing burnout.



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