

Episode 13: Women's Mental Health, with Dr. Bella Smith

Mandy: Hello and welcome to Enough, the podcast. I'm your host, Mandy Lehto. This show is a mashup of inspiration and exploration around what gets in the way of us feeling good enough. If you're a leader whose life looks shiny and together from the outside, but inside your inner critic assures you that you are one hot mess, this podcast is for you. It's time to own your work, quirks, foibles, imperfections, and all. Welcome to Enough.

I want to have more conversations about women's mental health and burnout. A CNBC Women at Work study conducted in America this year, in 2021, suggests that the pandemic has had a disproportionate impact on women. Sixty-five percent said that the pandemic has made things worse for women in the workplace. Thirty-seven percent considered quitting mainly due to stress. Fifty-three percent of children under a teen said they experienced burnout at least some of the time.

In my own coaching practice, I often hear words like deflated, languishing, and exhausted from my female clients. It's time to say enough. Today's guest is Dr. Bella Smith, a National Health Service GP with more than two decades of experience. She's on Instagram as @thedigitalgp and on The Well HQ offering insights on women's medical health. What should we be looking for as signs of burnout?

Bella: Your body will speak for you when it needs to. It's really interesting. Your body will tell you, I need to stop, and develop something (I think) physical that makes you go, hang on a minute.

Mandy: One of the challenges with burnout is the slippery slope way in which it happens. We often suck at being great self-advocates for our health because those pesky ingrained 'I can do it all' tendencies have kept us winning at life thus far.

Bella: It gets worse. Emotionally you actually start to ironically work harder because you think to yourself, I'm not coping, I can't keep up at this pace. So what I'll do instead is I won't sleep. I'll go to bed at midnight and I'll wake up at 5:00 AM so that I can get the work done to get the job done.

Mandy: Sounds familiar? Okay. What can we do to avoid languishing in the on and ominous of this pandemic? Let's find out.

This is such an important conversation. I have been waiting a very long time to get you on to talk to us about women's mental health and the hot little motor burning underneath burnout and perfectionism, which can tend to make us push ourselves so hard and then you add the cluster suck of the pandemic, wow. So tell us a little bit about what you are seeing in your practice with women turning up saying, I don't know what's wrong with me, but I ain't normal. What do you see?

Bella: I just have to put it in the picture. I'm a GP. I'm frontline NHS and I see women every single day. I think being a middle-aged female GP means that I actually attract more women perhaps. I see people for a number of reasons. Often, even before the pandemic, I would see a lot of women coming through with burnout, early burnout, or just signs of exhaustion, and then also add into that hormones, menopause, and all the other issues that can creep up on us women.

Women's health is something that I'm so passionate about because it is something I think that's so neglected and women's mental health, even more so. Then you add in the pandemic. The pandemic has been extraordinary on many levels because it has taken away the structure, the coping capacity, the ability for us to look after ourselves in any way, shape, or form that we can. It's absolutely bulldozed all the boundaries.

You're working from home, you got this happening, that happening, you've got childcare. I have seen a lot of women coming through with terrible, terrible effects on their mental health, and it's changing. When you look at lockdown when it first happened, there was a lot of fear. There was a lot of anticipation about their own health, about relatives that have evolved over the last 18 months I think for all of us, hasn't it?

The anxiety has changed, a lot of it has been a bit more of a low mood, the fact that no one can see each other, the loneliness, the isolation, and the chronic just not being able to—it's like constant rubbish and this ongoing feeling. We're seeing a lot. Actually, I'll be honest with you, Mandy. I'm seeing children, teenagers, young adults, who should be enjoying life, elderly—this is affecting us all, men and women. But we're here to talk about women. It's been a struggle (I think) for everyone.

Mandy: Thank you for sharing that. I think that, as you said, it's a very important topic. I know that even in pre-pandemic times when I was going through my own struggles with mental health and burnout, I didn't know what to call it. It's one of those things that it just took a really, really long time for me to go in and try to get help on this. Because I just kept thinking, I've just got to stiff upper lip it. I've just got to push through, I need more coffee, I need more high-intensity exercise. I just need to get a grip, that was me struggling with my inner critic a lot of the time.

Something tells me that I'm not alone there. Particularly for something like low mood, low energy, or low libido, just feeling low grade. That's a technical term, but you know what I mean, like the meh zone feeling and kind of the mush of it. Is this something that you see as well that people won't necessarily turn up? I had no idea what I was presented with when I went to the GP. When I got a diagnosis like there's nothing wrong with your blood, for example. It was just like, oh, I'm just a wimp and I just need to get a grip.

What spurred me to go to the GP was actually not the low mood, the libido that had long disappeared, or just the feelings of chronic exhaustion and pain in my joints. It was actually that I broke out in perioral dermatitis.

Bella: Your body will speak for you when it needs to. It's really interesting. Your body will tell you, I need to stop and develop something (I think) physical that makes you go, hang on a minute. I think you're right,

Mandy. I'll be honest with you, really honest with you, burnout was not really on my radar until about maybe five years ago, four years ago.

It certainly wasn't recognized as a medical term in my world. I'm sure other doctors and nurses probably had not heard of it, but I certainly hadn't. I don't know that it was readily used, but over the last four or five years, it absolutely has. Basically, it is emotional, mental, and physical exhaustion. I think the early signs of it are the emotional side, you just feel a bit fed up.

The early signs that you're fed up. You start to resent people a bit. You start to think, hang on a minute, she's working less hours than I am or you start to feel a bit guilty. Unlike physically, you may pick up the old cough and cold and think, oh, I'm just not feeling the energy. You fast forward that.

This timescale can be rapid. For some people, they burn out very quickly. It's the short sharp period of burnout. For some, it can be prolonged and you start remembering where you were, and you have nothing to compare it to. As it gets worse, emotionally, you actually start to ironically work harder because you think to yourself, I'm not coping, I can't keep up at this pace. What I'll do instead is I won't sleep. I'll go to bed at midnight and I'll wake up at 5:00 AM so that I can get the work done to get the job done.

Actually what you need is the angel on your shoulder to go, no, stop. Do you know what I mean? Sometimes it very often takes another person to recognize it to tell you. That hopefully will be a loved one, even your GP, it may be your skin, your body, your bowels, a headache, or something that says no, I've had enough.

I often say this, the people that I see who genuinely have burnout, who have literally depleted their emotional, mental, and physical well being and they have nothing left to give, it has probably taken them years to get to that point. It's probably going to take them years to get back to where they wanted to be, back to being healthy, and to being able to cope with that level of stress again. Not that they should ever cope with that level of stress again because that's what [...] them in the first place, but it's a slow burner.

I think they need the love and the support, and it needs to be a very planned entry back into where they want to go.

Mandy: There are so many important things that you just said. The one that feels most urgent for me is this idea that it's not about getting support to be able to get back to the lifestyle that made you burnt out in the first place.

Bella: A hundred percent. I think we're all guilty of this. I always say that I'm slightly on the edge of burnout. I think we're all slightly on the edge of burnout the whole time because this is the way we live our lives, isn't it? We're 24/7 on-call, we're checking things, we're on emails, we're living this fast-paced life, and we can't thrive in these conditions.

Actually, in some ways, we should be working less. We should be resting more. We shouldn't see rest as a weakness. We should see rest as a way of replenishing our energy. Therefore we can work more efficiently. Actually, if we can work more efficiently, everyone's a winner, surely.

You're absolutely right. The answer to that (I think) is to always have really, really strict boundaries. This is how I live my life. I have really strict day and night boundaries, family time boundaries. This is work, this is not work. Also, you have to say no. I say no to 90%. I know there's an opportunity, but I'm very strict with my time.

I think you just have to be putting yourself at the top of your to-do list. Your self-care is key, and it's all about you until you can absolutely look after number one. For example, I spoke to a lady the other day who is having terrible hormonal symptoms, possibly early menopause. We were talking and I said, now tell me about you. Tell me about your lifestyle. What is it that you do? Do you eat? Well, yes, I eat really well. Do you drink alcohol? No, I don't drink alcohol.

We went through this whole thing. Your day? She works long hours. Do you exercise? No, I don't have time to exercise. I'm thinking, in my opinion, exercise or movement in some way, shape, or form—moving our bodies, doing stuff with our bodies—is the key to maintaining good emotional, mental, and physical health. In essence, helping to prevent burnout. I'd say you've got to carve out that time in your day. It doesn't matter when it is and it doesn't mean getting up at 4:00 AM to do it. That's another thing that a lot of us find.

Waking up in the morning gets earlier. No, don't get up any earlier than. Just don't do that meeting. Say no or don't do that other thing that you said you'd do or make time for yourself. It's hard. It's really hard. As women, I think we find it hard.

Mandy: I think there's a particular challenge for women. I was reading some statistics today online that women do 20 hours. Since the pandemic started, we're doing 20 hours a week, in addition to our blurred home life, work life, jobs that we're doing. We're doing 20 hours of caregiving and household work. When you add that on to a 40-hour workweek.

Now that we're working more than ever because there's no commute, we're getting up earlier, we're staying later. People are checking emails before bed. I can't remember the percentage. Some ridiculous percentage of people are checking emails at 11:00 PM still. There's this pressure to continue to sustain pre-Covid standards of my house should look a certain way. I need to maintain this fitness routine, everything. The kids need to be perfectly educated when we're homeschooling them. There need to be healthy meals on the table. It's just coming to a breaking point.

A lot of these symptoms that you were describing and these physical, emotional, mental, I'd love to circle back to that because for me it was vanity. It was my skin because I had like a scabby goatee. That's why I went to the doctor, not because I couldn't climb the stairs or why I was drinking four cups of espresso a day. It was my skin. The pressure is immense right now.

If somebody was feeling a little bit low and a little bit like they can't sleep, what should people be looking for to take this seriously? Because everybody's tired, everybody feels a bit low. I shouldn't grossly generalize, but most people are feeling the impact of the pandemic. Could you speak as a GP? If you were there with your clipboard, for example, going through the kind of things that would be pointing to burnout, adrenal

fatigue, or however you might call it in the medical world, what would be some of the symptoms that women should be looking for?

Bella: Great question. In terms of mental health, you need to look for things that the red flags would be loss of complete joy, spontaneous crying. Even though we're all feeling rubbish, we should have moments where we spontaneously laugh, where we look forward to things where there's something in the future that you think, Christmas will be good or that holiday next year. If we can get there, that'd be lovely.

When you are low, depressed, when your mental health is taking a nose dive down the slippery slope that we don't want to go, you don't feel that joy. You have these very, very low, very, very sad days that are endless that go on. Not a good morning and a bad afternoon, but they are constant for more than four weeks. Also, you can have physical symptoms. Things like not eating or overeating. Actually, that's another one.

You may feel, I just want to eat, eat, eat, and I don't care anymore. Not wanting to see friends. You may feel that you're not sleeping. You may not get to sleep. You may get to sleep, but then wake up really early and have the weight of the world on your shoulders. It may be that you start noticing other physical symptoms that you're getting chest pain, your heart is racing, or you're waking up at night sweating.

Another biggie that happens for women, when we're not healthy our hormones often go off the scale because when you have a regular period, that is generally a sign of good health. Generally, obviously, there are conditions or medications where you don't have a regular period. We look at athletes and if they over-train, they often lose their periods. If you are stressed, your periods get heavier or change. Certainly, we've noticed this in lockdown.

I think there was a study that 52% of women said that their periods have changed because of stress. The pressure part of lockdown had created such a change in their hormones. It can be physical and mental. Often as you say, it may be something like your hair starts to fall out, your skin, or anything. I think that's why my job is so horrid at the moment because those little things that I would pick up on when I would see a patient face-to-face, if you're doing over the phone, it's very hard to do.

There are lots and lots of things that you would pick up by seeing someone and saying, hang on a minute, what's going on here or how long has it been like that? Those are the main ones. Obviously, the next one, the biggie would be if someone was having suicidal thoughts, and asking them that question and saying, have you thought—obviously, this is something that we're trained to do. For them to honestly say to you, well, actually, yes, I have.

There are different levels of burnout. As I say, it may be mild, it may be just that I feel exhausted that I can't walk up the stairs, or it may be that I'm so bad I can't see a way out. I'm at a crisis point and I need professional help. That is something that we would organize as a matter of urgency.

Mandy: As you said, some of these symptoms are so cumulative and also because we're in a pandemic that everybody around us might be feeling a bit low or limping along with our day-to-day lives. Are you finding that women are delaying coming in because there are people with "real problems" and I'm just feeling a bit low and tired? If so, what would you say to somebody who's listening who is nodding at all of those symptoms?

Bella: I've got a lot of things to say about this. I think in general, we are the linchpin. Especially in our age bracket, we are the linchpin of whole families. We have children relying on us. We often have our parents relying on us, our partners relying on us. We take over something like 80% of healthcare decisions for the whole family and not just our own. Because of that, often our own healthcare decisions get put to the bottom of our list. Anyway, I think women often put themselves last. The other thing is often these symptoms are insidious, that they creep up on you. It's certainly hormonal symptoms like menopause often creep up on you. It's not something that hits you like a chest infection. This has been going on.

Luckily, now the menopause is becoming so much more talked about, women are looking for these symptoms and are aware of it—thank goodness—so that they can get the right help that they need. But because of that, I think that takes time for women to come forward.

In lockdown, we've had women not wanting to come forward because they don't want to waste the doctor's time or they don't think it's important enough. Also, they haven't come forward often because they're frightened. They're frightened of COVID. They'd rather not be investigated, wait on a symptom, then go up to hospitals—some of them have said—or they're frightened of just coming into the surgery.

Another one is having phone consultations. There are too many barriers, they haven't got the time. The stress, they just haven't got the opportunity in their day. It's just too difficult. I often see this with women who say they have postnatal depression. They're so freaking exhausted. The phone, the receptionist, they say, is it an emergency? They'd say, no, no, it's not. I'm like, say, yes, it is. It is, you're depressed and you're postnatal. It is an emergency. You've got to come through to it.

What I would say is, unfortunately, you just got to shout a bit louder. You've got to make sure and be your own self-advocate. If you are worried, don't ignore it. Don't ignore it. Certainly, in my surgery I would say, just give me a call and I'll call you back. We'll have a chat, find out about certain things, or read about certain things.

If you know your own normal, you are the expert in your own body, and if you feel that something is different or changed, don't ignore it. I do loads of work, Mandy. I'm an ambassador for The Eve Appeal, which is the women's gynae cancer charity where we talk about the five gynae cancers. We talk about how women have literally died from embarrassment or died from ignoring symptoms. Please don't sit on symptoms like this. Just reach out and make a conversation.

Mandy: I hope you're enjoying the episode so far and that it's messing with your thinking a little bit around you taking some of those symptoms that you've brushed under the carpet a little bit more seriously. You are not wasting the GP's time. You need to become a better advocate for yourself. Don't do what muggins did over here and wait till you need to be hit in the head with a proverbial 2x4 to drag your carcass into the GP. Please become a better advocate for yourself.

What's coming after this segment is Bella's explanation of what she calls the elephants in the room. The way that we can start to get really, really honest with ourselves on how we're contributing to some of those feelings that we might be having, those feelings of depletion. I love her practical tips on what we can start to do. Back to the episode.

Bella: We always talk about the elephant in the room. All of us have one thing that you think—in terms of lifestyle—maybe am I drinking that bottle of wine? Are you really drinking a bit too much? If I was really honest. It might be that I have kale for lunch and I have a smoothie, but are you having that bottle of wine? That's the elephant in the room that might be tipping you over the edge.

We deal with a lot of athletes, active women. Actually, for a lot of women, it's like, I'm going to train, I'm going to train damn hard, and I'm going to slightly punish myself because I want to get my figure back. Actually, you're doing more harm to your hormones. You're stressing your body too much and we've already got enough stress. Actually, you don't need to be doing that. You need to be doing something a bit more healing, a bit calmer. Something like yoga would be a better workout for you at that point.

Don't get me wrong, high-intensity training is amazing, but some women are overtraining and some women don't train at all. It's very often that elephant in the room. If you look at the big picture and think, let me look at my life for a second, my foundations of fitness, and my foundations of my lifestyle, my sleep, my food, my nutrition, my exercise, my social, my family, my friends, my workload, and my stress levels, that's the other big one.

Stress levels, I often say to my patients, how do you destress? They look at me sometimes and say, what do you mean by that? I say, well, there has to be a way to release all this stress. Do you actively try and do it? It's hard and so many times they go, I haven't really thought about that. Well, I'd go for a dog walk.

It's really important (I think) to find a way, whether it's meditation or whether it's singing in a choir, which again, goes back to lockdown where all these things were taken away from us. All our ways of coping with life and stress were taken away. Not being able to sing in the choir, for some of my elderly patients not being able to meet for coffee, not even being able to walk down a road because of the risk of COVID.

I have one lady who hasn't hugged anyone for a year. She's been on her own in an apartment. These are men and women in their 80s, and it breaks my heart. It's having a good honest look at your lifestyle. I'm just saying, what can I do to make it that little bit better?

Mandy: I love this idea of the elephants in the room because I think we can talk ourselves out coming back to this. We can talk ourselves out of this, I'm fine. The insidious, I'm fine. But when you actually take a good hard look at what is going on, like yup, I might be training hard, but I'm knocking back a bottle of Claret every night. Or I'm more on the Peloton for an hour but I'll eat half a cheesecake, not me personally.

Sometimes we exercise so we can overeat or overdrink something. I love this idea of the examples of the elephants in the room as well. There are all these key aspects—the physical, the social, am I sleeping properly? Those are really important. Do any others come to mind aside from those you've mentioned?

Bella: No, but one thing I want to say is that I've been in the same bed for 10 years. I've just gotten a new bed and it's absolutely amazing. I think to myself, I spend money on my car, we spend money on holidays, and yet sleep is the fundamental thing that keeps us healthy. I've only just got this amazing bed and pillows, et cetera. Others will come to me.

The other thing I wanted to say while I'm remembering it was that I speak to my 11-year-old daughter. Going back to what you're saying about punishing ourselves, often you're right, we say, I'll have a big night, I got dinner, but tomorrow morning, I'm going to get up. Even though I'm tired, I'm going to make myself go for a run to get rid of what I ate last night or vice versa. I'm going to go for a run so that I can be ready to eat loads tonight. I say to my daughter, this body, our amazing bodies are going to be with us from the day we're born to the day we die. We've got to love them, we've got to cherish them, we've got to respect them. We don't punish them. We're kind to them. We're grateful for them.

When they go wrong, we help them. We got to love our bodies. They are miraculous. Obviously, everything in moderation, but if you do something and it hurts or if you feel it, don't do it. Treat it like a friend. My daughter listens to me and she's starting to respect it.

She grabs a bag of Haribo and I go, have a couple, you probably don't have loads of them because it's quite inflammatory to your body. I don't quite say that, your body would feel a bit sick. You won't enjoy it and then she's starting to learn it. It's just listening to our bodies, respecting our bodies, and being grateful to them.

Mandy: I want to ask you an odd question perhaps to be asking a GP. In my experience, a lot of the women who tend to have burnout, perfectionist tendencies, be overachievers, and a lot of the other guests that I've spoken to who have clients might be therapists, the imperfection specialists.

Sarah Normandin says that a lot of her clients are women that tend to present with these types of behaviors and also tend to be quite disconnected from their bodies. Like being heads on legs. The body will do what I say it's going to do, and I will put a manhole cover there just underneath my sternum so I don't need to feel the body screaming so I can keep pushing.

We've talked about this in other episodes from a therapist's perspective. I'm curious if you have anything to say about becoming more in tune with our bodies from a GP's perspective. Some people are way better at listening to their bodies than those type A, very driven, very ambitious people. What do you say to that?

Bella: I think it's absolutely fascinating what you've just said, Mandy, because I think you're absolutely right. A lot of people are disconnected. I think that the more you listen to your body, it's so powerful. It's talking to you. Just like the universe is talking to you, your body is telling you things.

I think that it's not just everyone. I think our generations, as we've gone through the decades, are becoming less and less body literate. With the world that we've set up, we talk about tracking periods. It's not just about the bleed, it's about your cycle and how hormones can be your superpower.—knowing when to train, knowing when you're strong, knowing when you're ovulating, knowing when you want sex, knowing when you don't want sex.

Understanding your urges is actually really powerful being a woman because we've got these wonderful ups and downs. There are times in our cycle when we're stronger, when we can build more muscle. There

are times when we're more risk-taking. There are times when we're calmer, when we sleep better. These are different times in our cycle.

We can track it. Of course, we can track it. We'll have different vaginal discharges. We'll have different breast sizes. Our skin will look different. Our bowels will be different, all depending on our hormones. It's amazing. A hundred years ago, a woman would know when she was fertile, when she was ovulating, and not so much now.

Mandy: For somebody who's recovering and they're trying to find their footing again, they can't go back to how they used to be, and they're not quite the new them, the 2.0 version. They're in this in-between. The reason I'm asking this question is I spent a lot of toing and froing thinking, I feel better enough, now I can start running again, and then I would slide back. Two months later, I feel better now, now I can start running again, and I would slide back.

It was like, duh, maybe running isn't for you anymore. That would be my first ask. Somebody's recovering and coming out of them, how do you speak to this person that they don't slide back into the old 1.0 version of themselves?

Bella: First of all, all the way through your journey, whoever's listening, I would journal. I would write down how you're feeling and I would try and document symptoms and how your energy levels are so that you can reflect back. That's so powerful. We do this with depression, with mood, with anxiety because it's hard. You think it's not getting much better. You will reflect back and you say, actually, I am a little bit better. That's amazing.

The other thing, really, is you've got to take it slow. You have to take it slow. In my role as a GP, I have the ability to make it as slow as possible for you. I sign people off. We do phase returns. We make it absolutely doable for that person. Sometimes I have to insist and sometimes people are able to take as much time.

Sometimes I have to say, no, you're not ready. Sometimes I have to say to people, I think you are ready, come on. I think the other thing is, there's sort of boundaries and different conditions that are slightly similar that we're seeing like long COVID, chronic fatigue, and burnout. I think, historically again, recognize and have gained. Especially with long COVID now, it's done heaps for new research. It's so much for new research into these conditions.

Understanding, because people that have never had chronic fatigue and now got long COVID and they're going, oh my God, these symptoms are real. I literally can't get out of bed and I now respect those people that have had chronic fatigue. Again, for them, it's all about moderation. It's about piecemealing, doing things little and often, and listening to your body on the days that you don't have the energy, you don't do it.

You say I can't do it today, I'm having a down day. But tomorrow, you wake up, you feel better, you do it, but you don't overdo it. You do it in moderation and you listen to your body, whether that's tracking your heart rate, how you feel, or your mood, and taking it slow. I think recognizing that this is not failing. Physically, mentally, this is a thing that needs to heal and it takes time.

Mandy: The second question I wanted to do as we start to draw this to a close, I want to circle back to boundaries. You jumped into boundaries at the beginning and I thought this deserves some space. Let's get our elbows out and make some space here for boundaries. This applies to people who are coming out of burnout, but it also applies to those of us who, as you said, is just left of burnout. I would love to hear how you, as a professional who has probably been left to burnout particularly since you've been working in this industry during a pandemic. It's very, very intense.

I would love it if you would take us behind the GP's curtain and share with us how you create boundaries because you could work 24/7. You could quit sleeping temporarily. You could get rid of all the things that bring you joy because there would be plenty of work for you to do.

Bella: Literally, I could work eight days a week. Yeah, 100%. I guess to start off with, sleep is my priority. I sleep about eight to nine hours every night. I will not wake up before 7:00. You cannot pay me to wake up before 7:00. I live three minutes from my work. So I'm able to drive very quickly to work if I'm needed.

I make time for my exercise. I do something every day. Today I walked. Today was kind of a rest day. Yesterday I did a fitness class. The day before, I ran five miles. It was my day off. So exercise is key.

Lots of friends will send me messages or would you just look at this rash? Would you look at this? Can I ask you questions? If they're good friends, I will answer questions like that and help people, but it's in the time that I've allotted for work, which is 8:00 AM until 6:00 PM. When that's over, no, I don't do that.

I have a barometer, where, yes, the summer has gone quiet. I know for us, September, October are going to be busy. I know that and now I'm going to scale back on social events. I've got to have a certain amount of time with my children. I want a certain amount of time at home with my husband. I want a couple of date nights.

The work I will do a certain amount, but I'm very aware of how I will spread out my week and I stick to it. As soon as I recognized that things were getting a little bit weird—at the beginning of the pandemic, we were working very long hours and I was very aware that we were overworking. I got to a point where we weren't able to take any annual leave. We weren't allowed to take any annual leave. Then it was just a case of just trying to minimize the other stuff.

Really, I just gave up booze because I just found that that was a way that I knew I'd sleep better and I knew that I could focus better if I didn't drink anything, and I didn't do as many exercise classes, and I just slept more. But now that we're back, able to have annual leave, I make sure that I take at least a couple of days off, annually, pretty much every six weeks to have time for myself, time away, time to switch off. Because the thing with my job is that I'm often listening to heartbreaking stories. I'm listening to people.

Today, I'm sounding hoarse because I've literally spoken to about 60 people. All those stories, all those people are real. They're all real, genuine, heartbreaking, tricky problems that I'm trying to help solve. You give a bit of your soul to all of them. We try to.

Mandy: What about digital boundaries?

Bella: I'm guilty because I find that I have social media off between 8:00 AM and 6:00 PM because I am at work. When I'm with patients, I can't really check my phone. I will look at my phone and my emails when I get home between 6:00 PM, 8:00 PM, and 9:00 PM. But then, yeah, I try to turn it off. I definitely love a digital detox. I've done a couple of those and I think they're fabulous. Just having that phone on airplane mode from about 9:00 PM, and just not touching it again or playing a game maybe.

Things as well like tucking in a drawer so you haven't got the blue light, the white light, or whatever it is, and making sure that you're not getting distracted. I find checking my phone tricky because I often find, when I finish my surgery, I've got 100 WhatsApp, but I turn all my notifications off. I don't know if you do, Mandy. Because you're often [...], so I'll often have all these WhatsApps left. It's finding what's right for you.

Mandy: One thing that I noticed when I was really in the thick of my burnout, I was awake so much of the night that I found that I ended up just reaching for my phone at night and then I couldn't fall back asleep. I probably know what you're going to say about when somebody gets up to pee as many women of a certain age tend to pee in the night. It's such a temptation to pick up your phone.

I used to tell myself, I'm just going to look at the time. I'm guessing what you're going to say on this, but go on, indulge us. Checking your phone when you wake up to pee in the night.

Bella: Don't check your phone. I absolutely never do that. I never check the time. I'd rather not know. I just literally keep my eyes shut, go for a pee, and come back. Because imagine, the light is just going to wake you up. Then what are you going to find? What if you find a comment on your Instagram or an email that comes through, are you going to open it? What does that lead to and the worry?

They say that if you wake up in the night and you can't go back to sleep, you need to do a really mundane chore like clearing out the drawer in your kitchen or do something really mundane and just try and don't do it in bed. Do it outside of the bed so that you're cold and you're like, oh, I'll get back into bed. Then you get back in bed and you'll fall asleep. But I always have a book on the go. I'm reading a lot of biographies, autobiographies, and those sorts of things because I find them fascinating. But I have a certain time of day

when I will read those. In bed, I often just need a story. I literally just need a love story or even some kind of trash or something.

I even love reading. Sometimes the children have read things like *The Hunger Games* or *Harry Potter*. I'm going to read *Harry Potter* again because it just takes you to a different world. You can switch off and then you sleep.

Mandy: Yeah, that's true. I think the key thing is to switch off because it's the torrent of thoughts and the unfinished items on the to-do list. The unclosed loops that as soon as there's any space start to twirl around.

Bella: When you wake up in the night, those worries are 20 times as bad as when you wake up in the morning. You wake up in the morning and you think, why was I even worried about that?

Mandy: I ask every guest at the end of an episode to lay a brick of wisdom.

Bella: I would suggest everyone give journaling a go. That's my thing—writing a little diary where you can jot down how you feel, jot down what you're noticing about yourself as the days go on. I think it's so powerful because you will understand yourself so much better if you can do that in terms of what you're thinking, but also what you're feeling. I think if you want to learn about your body, become more body literate, and understand it, the best way to do it is just write about it.

Mandy: I love that idea. I'm going to add that to my journal. Just what am I feeling, how is my body feeling today, how is my energy feeling? I hadn't thought about that. I learned something new.

Bella: And write down things like energy levels, write down how well you slept, write down how fit or how well your exercise class went. What are your bowels doing? How many times do you get up to wee? If you're having periods, whether you're in your period or whether you're ovulating, you will notice there's a link. You will notice that your bowels will do something different just before your period. You'll notice your energy levels would do something different, and you'll start to learn the magic of what goes on within us.

Mandy: That is a brilliant tip. I'm totally doing this. Where can people send you updates on their skin and bowel movements? I'm kidding, but where can they find you on social media?

Bella: I'm @theDigitalGP on social media or Dr. Bella Smith, it depends. One or the other. Then please find us at The Well HQ, again on Instagram and on Facebook. We've got a website. We've got a book we've just been commissioned. We've got webinars and we're setting up a brilliant new community so that women can ask all these questions. Come to our website. It's thewell-hq.com.

Mandy: Fantastic. Thank you so much for playing with us. I'm all pumped up. I have all kinds of new tools. Thank you, Bella.

Bella: It's a great pleasure, Mandy. Thank you, take care.

Mandy: I hope this episode reminded you that you are more than your achievements. You are also a miraculous tender human body that needs you to advocate for it, so please do. While you're at it, please share this episode with someone in your life who needs to hear Dr. Bella's wisdom.

I asked you a couple of weeks ago to write into the show at hello@mandylehto.com to share what episodes, what guests, and what pieces of advice or tips you're acting on and how that's working out for you.

Today we have our listener writing in from the West Coast of Finland. [...] has told us that she really enjoyed episode 6 with Farzanah Nasser, nutritional therapist and functional medicine expert. She says, "Farzanah gave me the important reminder not to go against my body when something's off balance, but rather to move along with it, respecting and accepting what's going on, and remembering that it tends to pass." Thank you, [...]. I appreciate that.

If you have an episode that you've really loved and you've implemented something from it, do write in and tell us how that is going for you.

Next week on the pod, we are drawing to a close this season and I will be doing a quick solo episode.

Catch that one next week as we draw themes together for series 1. I also wanted to let you know that Dr. Bella Smith will be back doing a bonus episode on sleep, especially if you are perimenopausal or menopausal. Because sleep can be a challenge then and we can't be in our enoughness if we're ratty and radioactive from lack of getting the Z's that we need. This is Mandy Lehto signing out for Enough, the podcast. As ever, thanks for playing with us.