

28. On Self-Care and Meditation with Robyn Tiger



**FULL EPISODE TRANSCRIPT**

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**Arpita:** Hey everybody. Welcome to another episode of Doctors Living Deliberately. We are excited to have you guys here today with this amazing guest that we have, but I wanna first say hi and welcome my cohost, Dr. Michael Hersh. Hey Michael, how you doing?

**Michael:** I'm doing great Arpita. So, so great to be back here with you today.

**Arpita:** Yeah, so fun. Well, I, like I mentioned, I'm super thrilled about having our guest today. Her name is Dr. Robyn Tiger. She is a double board certified physician in diagnostic radiology and lifestyle medicine. She's also the founder of a physician wellness practice stress-free md, where she uniquely combines her trainings in a lot, there's a lot here, guys. It's amazing. In medicine, in yoga therapy, in meditation, and in life coaching. And she does all of this to teach other physicians, the whole person approach to elevate their overall health. So I'm super excited. I met Robyn back in, I think it was November of 21 when we were at a physician coach conference, and she taught us all about mind, body connection and literally had us up and dancing in our seats during her lecture to help us realize how much tension we carry in our body. And it just resonated so much with me. So I was like, I have to have her on as a guest. So welcome Robyn.

**Robyn:** Thank you. Thanks. So maybe we should stand up and do that again right now. But thank you. It's really an honor. I'm so happy that you invited me here today to be your guest.

**Arpita:** Yes. Well, do us a favor. Tell our guests a little bit about you, and if I've missed anything or left, had any gaps in my intro, fill that in for us and for them.

**Robyn:** Yeah. Well, no, you, you said it really well. And that is, that's pretty much me in a nutshell. The end story of my journey is that I am focusing on the whole person that I have learned over this last decade plus that there are many, many facets of the human that need attention based on the medical literature to improve our health and wellbeing. And that is where we are now seeing the whole person. And, you know, how did I get here? Like the saying goes, make your mess, your message. So, And that's really how I got here.

So about 15 years or so ago I was Dr. Mom doing all the things, two little kids, husband working as a radiologist and in charge of lots of things on the board of this, the room mother, that and, and so on. And I started to develop several different symptoms that I couldn't really put together, they seemed really disconnected and I started to go to different doctors for all the different things that were happening to me, a specialist for each thing. I had vertigo and tinnitus. I had this, these spontaneously bleeding gums, which I don't see how that had to do with anything. I had really bad pain in my body. Like everything hurt. Like I feel like the tin man all the time. I had reflux like this, burning chest pain, and I couldn't digest my food. Like every time I ate, my abdomen would distend and I'd have pain. I had change in bowel habits, constipation, diarrhea, really couldn't sleep. I woke up tired every single day, counting the hours before I could go back to sleep again. And I had a really, really scary symptom happen where I would get these intermittent paresthesias where I would be, for example, in the middle of a breast biopsy and I'd be holding the gun and the tip would be right at the breast lesion. And I just stand there cuz I like all of a sudden couldn't feel my hands and my tech would say, Hey Dr. Tiger, you're right there at the lesion. And I would just say, yeah, okay. I'm just checking it out, making sure I'm there. But the truth was, I was just waiting for this, this numbness and this lack of sensation of my hands to pass. I'd be driving a car, I'd lose sensation in my hands in the steering wheel. I would be cutting up vegetables. I would lose sensation of my hands in the knife.

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So of course, as a doctor, what do we do? Our left brain goes to the worst. And I thought I had a debilitating neurologic disease, right? Terrifying. And I started to have a lot of really bad thoughts. You know, thoughts that didn't serve me. Thoughts that I didn't really wanna spend another day like this anymore. Really scary thoughts. And I went to gastroenterologist, a neurologist and periodontist, and I went to mental healthcare professional, and I went to pt, ot, chiropractor, acupuncture, massage therapist, you name it. I did at Psychiatrist and I took a lot of pills. They gave me a pill for an ill, as we call it. I had every lab test, which was negative, every imaging test, which was negative. As a radiologist, of course, I had every imaging test and I didn't know what to do. I just felt awful and I felt that at that point, that Western medicine, which is amazing because we are Western medicine trained physicians, it just wasn't what I needed at the time and I didn't know what it was, but I had three physician colleagues die from suicide. And I was really scared that I was going in that direction, and it's like, I, I just could actually see their faces and they're like, turn around, you know, go figure it out. And, and so I was already eating what I thought was pretty healthy. I was exercising, so I'm like, well, what else am I supposed to be doing? And I kept hearing about this Yoga 101 series down the road from my house and I have to tell you, I did a lot of eye rolling. Right? I thought that was for those people that do that weird stuff in the hallway, in the gym, all the way in the other room, and, you know, weird spandex, weird music turned upside down, twisted into shapes. That as was a radiologist, I thought was totally impossible. And I just thought it was ridiculous. But I have to tell you, I, I didn't have anything else to do. I wasn't, I had done everything else I thought I could do.

And I didn't wanna go alone, so I grabbed my neighbor who's a nurse, and I said, Hey, let's go take this yoga 101 thing. And she like rolled her eyes and I said, come on. If it's terrible, we'll go get dinner. We'll just leave. So it was a busy Dr. Day. I can remember the day perfectly. It was a Thursday. I had, you know, worked the whole day. I can't tell you how many cases I read, how many procedures I did. I came home, I fed the kids, I bathed the kids. I got them in ready for bed, hand them to my husband. 7:30, I was at the studio for the very first class walking in, kind of like, Ugh, what am I doing here? I'm exhausted. This is just awful. And I have to tell you that at the very end of the very first session, I had a total 180. I felt calm. I didn't have any of the symptoms that I was describing. I just felt clear, I wasn't tired. Even after the day that I had spent. I didn't know what happened, and that was my entrance into recognizing that there was something else that I needed. It wasn't what I was doing, and it was something that had to do with this.

And so I started to dive into the medical literature because our left brain wants to understand and unpack things, and as I continued taking the classes and feeling better and better, I realized from my studies that I had a very imbalanced autonomic nervous system, and it was my physiology that was totally off, and I was learning how to actually bring my sympathetic and parasympathetic nervous systems together, in balance, in homeostasis so that I could feel better and that all of these symptoms were related to all this inflammation in my body and all this cortisol that was so high, the stress hormone. And as I started to lower those levels and decrease the inflammation, I just started to feel better and better. And so that was really the pivot point in my journey where I recognized, you know, what was going on and how I needed to fix it.

**Michael:** Yeah it's fascinating because you know, you started talking about a whole body approach and I think that there is something, you know, it's not only just western medicine, but there's something cultural about this as well, that we tend to silo things, right? I, there's a specialist for this and a specialist for that, and even as a physician when I'm seeing patients there is a hesitancy to see how completely, you know, separate symptoms might be related in different ways. And so can you talk a little bit about how you have started to kind of integrate, a whole person experience to help with the healing process?

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**Robyn:** Yeah, absolutely. So, you know, I like to think of myself as a lab rat, right? So I was in the lab and I was seeing these, these incredible changes happening for the better. So, And you know, yeah. Disconnected. You're a doctor. She's got bleeding gum. She's got, I didn't mention I had migraine headaches. Now she's having diarrhea. Now her, she's can't feel her hands. I mean, what's going on? It seems very disconnected. Right? But it wasn't. It actually wasn't. And what we know from the medical literature is that as high as 80%, some say 90% of symptoms that patients report to their primary care physician about, those symptoms are related to stress. That is really, really high. I lead faculty and subject matter expert in stress management for the American College of Lifestyle Medicine, so I just finished creating the board review material for the next exam coming up. So I'm up on these stats and I have to tell you that when I read that and learned that, it blew my mind. So almost all things that we're reporting to our doctor about are related to stress and we don't need a pill for all those things. Sometimes we do, sometimes we need a procedure, but most of the time we don't.

So my journey was that as we are lifelong learners, right? We're doctors. We love learning. I dove, dove, dove into studying what was helping me. So first I studied yoga teacher training, which is a 200 hour level training. And then what I learned was there was a field of yoga therapy, which was a three-year certification requiring a thousand hours base level training. And that would actually allow me to take what I had learned and help people with symptoms, illnesses, and diseases in a way that I didn't even know was possible until I started learning the medical literature. So I became certified in yoga therapy. And it was there that I started learning about meditation and a specific type of meditation called iRest. Like the iPhone, Little I Big R. Which was created around the time that the iPhone came out and it was created for Walter Reed Army Hospital. That's for our military, to help our military relieve they're suffering from P T S D. And what we were told was that hey, they wanted something that was secular, something that was evidence-based, and something that didn't say yoga or meditation, cuz they're gonna think it's weird, they're not gonna wanna do it. So that's where they came up with the name iRest, because who wouldn't wanna rest? And this meditation was very, very attractive to me, not only experiencing it, but because again, it was secular and it was evidence-based and it was so powerfully strong in the literature. So I went on to study that. And became certified three years later in this specific type of meditation. And I spent many, many years working with the body, right? Through yoga therapy, through meditation, studying trauma, studying somatics, studying many different disciplines with under that umbrella and helping people, many times, most of the time, physicians.

And I realized that there was another piece that was missing, and the next thing was, well, what about our thoughts? So I had a bottom up approach, which was getting our body regulated, and then I wanted a top down approach. Okay, now that the body's calm, we can actually work with the thoughts that our brain's telling us. And I experienced life coaching and it was really transformative. So I went on to study to become a certified life coach as as both of you. And that really brought this bottom up and top-down approach to coaching, to wellness, to the human in a much more whole form. But there was more. So as I continued to study, my clients kept asking me about things like nutrition and fitness and sleep and connection and drinking and doing drugs, and maybe they're surfing on the web and gambling and all these other unhealthy habits. And I learned about the field of lifestyle medicine. Along my journey, I started meeting some lifestyle medicine certified physicians, and that's how actually I got involved with lifestyle medicine, joined their faculty, and then ultimately studied and became board certified because I wanted to be able to create a whole person approach to my coaching to help people at all layers of everything based on the medical literature and lifestyle medicine does just that.

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**Arpita:** That's amazing. That's a lot of stuff, Robyn. I'm just gonna like so many things. And you say it so eloquently. And one point that really resonated with me, I'm doing some training for myself right now with regards to the parasympathetic and the sympathetic systems. Right? When you were talking about that and how we don't recognize that actually our heart and our mind are so connected in so many different pathways, right? The endocrine with the biochemical pathway, the electromagnetic fields, just the neuro synapsis, there's so many different pathways that are actually connecting them. And what I'm learning is that the heart has actually more connections biochemically to the brain. And so when we are having emotions come up for us in our bodies, that is heart-centered. And so when we can start to really kind of hone in on that and put ourselves in what we call this heart mind coherence, with the heart rate variability, with our breathing patterns, and really having positive thoughts when we're thinking of the compassion, when we're taking those breaths and heart-focused breathing, it makes a difference. And so they very much so speak about the parasympathetic and the sympathetic coming into check with that. So can you tell me how that plays into the yoga therapy specifically and what you do with your clients with regards to yoga therapy and how it's implemented, how it complements all of this?

**Robyn:** Yeah. So I love that you're bringing that up and I know there's a lot of work in heart math where they actually recognize that sometimes your heart is actually sensing what's going on before your brain has time to catch up. So when you feel something in your chest, you feel something in your body that's actually real, like electrodes have been identifying that to actually be real. And I think that's what you're alluding to is the power of what your heart's actually recognizing and picking up on. Such amazing research.

And so we as doctors learn a lot of anatomy and physiology. But what we never learn is actually how to work with our own anatomy and physiology. So we could rattle off the autonomic nervous system and all the neuroendocrine pathways and so on, but we don't actually realize that we can actually work with that and change what's going on in any given moment. And the way that we can do that is in multiple ways. And you know, I work predominantly through yoga therapy and meditation with respect to the autonomic nervous system. We focus on a few different things. One is the vagus nerve. So the vagus nerve is the key nerve, cranial nerve 10 in our parasympathetic nervous system. Vagus means wanderer in Latin. It's our longest cranial nerve. It actually starts in our brain and it goes all through our body, into our abdomen and innervates many different organs and does lots of wonderful things. And the vagus nerve is a nerve that we tap into. How do we activate the vagus nerve? How do we increase vagal tone to increase the parasympathetic nervous system's response?

The second thing that we think about is utilizing the parts of the body that take up more real estate in our brain. So if we go back to the homunculus, that we learned about in medical school or if you had anatomy even in high school. The homunculus is this drawing of this individual which has really big hands and a really big mouth, and a big face and a big tongue. And when we take Homunculus, we recognize that Homunculus is the geographic map of our body in our brain. It's the geographic map of our body and our brain. And when we actually lie homunculus over top of our brain, we can see the parts of our brain, how they're taken up with respect to the homunculus. And so you'll see the hands take up a large part of our brain, your mouth, your face, your tongue takes up a large part of our brain. There's more real estate involved there. So when we work with those parts of our body in particular, we can utilize more neural pathways in any given moment and have a quicker relaxation response. So really focusing on the anatomy and physiology of our own body, the vagus nerve, and the parts of our body that are going to be involving more neural pathways at any given time.

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**Michael:** Yeah, that's fascinating. I, you know, I, I, wanna ask you, because you started talking a little bit about skepticism when it comes to, to some of this work. And obviously physicians very kind of science-based, skeptical of things outside of what we've learned. And then you were also talking about this program with the veterans, iRest and they didn't want to use the words yoga or meditation to, you know, increase people's interest in participating. And so, how would Robyn now address these issues with Robyn, who walked into the yoga studio for the very first time thinking, I just gotta get outta here and, and maybe, you know, cut loose and go to dinner. Like how do you coach people around that kind of discrepancy?

**Robyn:** Yeah, I hear that a lot. And you know, when I'm speaking to physicians in particular you know, I say, I know how you think, I know how you learn and this is how we're gonna do it. And so I like to think about the what, the why, and the how. And it's all about semantics as well. So most of my programs, my coaching, my talks, I call it what I'm teaching, but I don't use words like yoga, meditation because it's not necessary, right? It could be relaxation, it could be thriving, it could be, you know, whatever it is. But I think language is important just like we changed it for the, you know, I say we, but my mentor who created iRest, Dr. Miller changed it for the military. When I work with the veterans, they call it sleepy time with Robyn, that's what they would call it. My class was called Veterans at Ease, you know, when I work with the veterans. So I call things in a way that is, that would make sense for the person in front of me and I think that, you know really for physicians in particular deconstructing concepts into short, actionable bites of information. When I teach things, I teach things that are very short. Most of the things I teach are 15 minutes or less because when I've asked the busiest physician, you know, what's the least amount of time you have in any given day? I get 15 minutes. I'm like, got ya. Right? So I have things you can do in one minute. I have things you can do in 30 seconds. I have things if you have an hour, wonderful. Right. So it's really meeting people where they are.

And, you know, if I were to talk to myself back then, well, first of all, I'd pat her on the back for staying and for, you know, not taking the path that her unfortunate friends did. And for recognizing that there's more out there than what we're learning, and that it's okay to expand your mind until and to keep on learning, because every day should be a day of education. I wanna learn at least one new thing every single day. So I wouldn't actually reprimand her. I would kind of pat her on the back and say, good for you. Good for you for, for giving this a try, even though you were scared, even though you were doubtful, even though you thought it was worth a lot of eye-rolling. And good for you for staying open to learning something new and bringing fear along with you and doubt along with you for the ride.

**Arpita:** Yeah, that's very, very true and impactful. And I'm thinking back to even med school training, right? Like when we were in med school, I think Michael Hersh might be a little bit younger than me, but when I was in med school, I remember kind of being taught that this is the only way, this is what it is, right? And so as we have kind of evolved and grown and start to recognize that there are other options to consider for our whole body wellbeing that are outside of the traditional medicine, traditional Western medicine. It does come with skepticism in the beginning. Right? And even just with the coaching, you know, when I tell my story, when my best friend was talking about coaching and became a coach and I thought she was crazy. Right? So even just that little mindset component, sometimes we don't think that there's anything different because that's been ingrained in us. So having the gumption to say, yeah, I'm gonna stick with this and I'm gonna look at it and have the guts to consider something else. Because something what I've been doing isn't working. That's, that's where we need to start. So,

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**Robyn:** yeah. What I was doing wasn't working, and I had to find what was. And again, we're Western medicine trained physicians. I, I am so grateful for Western medicine, but it's incomplete in our education. And I may be the matriarch here, not sure at age 57 plus. But I have to say that I had none of this, zero in my education with respect to stress, I learned nothing about nutrition. I didn't learn anything about exercise. I didn't know anything about sleep. All of these additional pieces really are so, so important to our overall health and wellbeing, and we're just not taught. Yeah, we're just not taught. How could we teach our patients? How could we teach our family if we don't know? Yeah.

**Arpita:** By doing this, right. We're putting it out there

**Robyn:** Doing this. By putting it out there. Yeah.

**Michael:** And just highlighting the point as well, that if you keep doing things the way that you've been doing them, nothing changes. And so this just gets to the point of being open-minded, right? So there are gonna be things out there that resonate with you, that you connect with, and that really can transform your life. And there may be other things that you try and maybe it doesn't sit as well. But the point is being open-minded and leaning into some things that maybe you're less familiar with but are interested in learning more about, can really, again, transform everything that's going on for you. So I, I just wanna encourage the physicians that are listening, if you are kind of, of the mindset where, you know, some of this sounds a little bit, woo, some of this sounds like, I don't know, this doesn't really make sense to me. That's okay. It doesn't have to, but that shouldn't keep you from, you know, letting yourself think more about it, learn more about it. Because as you were just saying, Robyn, like when you allow yourself to learn more about these things, it actually translates not only to transforming your life, but you can bring that to your clinical practice as well. And as I have learned more about these different aspects of, the, just these different things that you can do outside of traditional Western medicine. It helps in my daily interactions with my patients as well. Our patients are out there, they are on the internet. They're reading about these different things. They're learning different techniques and so it's great for us to be informed and it may help us to transform ourselves in the process. There's nothing wrong with that.

**Robyn:** Yeah, like we are the gatekeepers of health. That was our job. Yeah.

**Arpita:** I'll just add, like you mentioned the woo Michael Hersh, right? And so one of my mentors said this to me when I first started the journey as well, right? If the woo makes you feel better, wouldn't you want some of it too? Like who the hell cares what other people think? Or whatever's holding back. Be curious about what's holding you back. If it's just the fear of what other people think or what the perception's gonna be, who gives a shit if the woo makes you feel better? Right.

**Robyn:** I mean it definitely makes you feel better. it increases your longevity. The medical literature is there. You are adding years to your life and it's really closing the gap on this scariest statistic of health span versus lifespan. So, I dunno if you've seen any of this literature out there, but our lifespan is how many years we live and our health span is how many years we're living healthy. And research shows that the last 10 years of our life, most people are suffering with illness. And learning how to take care of yourself at all of these levels based on the medical literature, brings those two together. Health span and lifespan. So there isn't this gigantic gap. I mean, I don't know about you, but I wanna be chasing my grandchildren around someday. You know, I wanna be right there. I don't wanna be in a chair, everything hurts, I can't breathe. You know, I'm on all kinds of meds, you know, no thank you. Right? And so, you know, we, we can think it's, woo but we can go to the

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medical literature, you know lifestyle medicine is a real medical board. Its pillars are grounded in the medical literature and it's about prevention, reversal, and treatment of diseases based on these lifestyle changes. So it's very, very real and that helped my left brain a lot. So any doctors out there tons of literature out there. So you can kind of wipe the woo off.

**Michael:** Love that. Wipe the woo off. Well, I mean, this has been so great and you have some really amazing stuff going on right now. Tell our audience about, a little more about you, and if they wanna learn more how they can find you? Tell us all the things.

**Robyn:** Yeah. So, well, I love to educate however you love to learn and I think that you should have CME for everything you do if you're a healthcare professional. So everything I do has cme, so whether you're listening to my podcast called the Stress Free MD podcast whether you are, you know, doing any of my courses, I have self-paced online learning, I do live coaching one-on-ones, and I have a lifestyle medicine wellbeing group coaching program that's actually starting soon. And, you know, I'm not sure when this is being released, but we are gonna be doing this over and over again. I have a colleague who's amazing, Dr. Melissa Sundermann, who's known as Dr. Outdoors. She's an elite athlete. And the physician at Canyon Ranch in lifestyle medicine, and she and I actually put together this whole person approach to physician wellness where we are teaching doctors all the things you learn about stress management and nutrition and fitness and sleep and social connection and more. There's so much all the pillars of lifestyle medicine and so that's actually starting it's live virtual group coaching, and I'm starting to do some retreats. So I have a retreat coming up this fall with Dr. Jonathan Fisher. He is an amazing human, top doc cardiologist in Charlotte, mindfulness expert. He is the founder of ending Physician Burnout. He has an annual online event and he and I are leading a retreat on a weekend, mid October in the Blue Ridge Mountains in gorgeous fall foliage time. So I just love to sprinkle all this information out in any way that you like to learn. Oh, I'm also writing a book, which is gonna come out in September.

**Arpita:** Oh, wow. What's the book's name? Do you have the title,

**Michael:** By the way? I'm also writing a book. Oh, by the way,

**Arpita:** It's on the side.

**Robyn:** I, you know, I kind of wanted to put a lot of this in a small, easy, paperback kind of book. To just give the key components of what I'm teaching and the working title is called Feeling Stressed is Optional. And it's really through the lifestyle medicine lens. Really as I started to say earlier about how I like to teach the what, the why and the how. It's like what is it that we should be doing, you know, or could be doing, getting that shut off. Why does it work? And why does it help to do it? You know, decreasing incidents with chronic disease and cancer and so on, and then how, cuz we're taught so much, you should be doing this, you should be sleeping better, you should be eating better, you should be exercising more, you should decrease your stress, but no one tells you how. So it's really, really some key points on what, why and how, and you know, it's called Feeling Stressed is Optional because we can't prevent the stressors in our life from happening, but we can actually change how we feel about it and we can change how we feel about it through all of these different pillars and lifestyle medicine. So yeah, look out for that. There'll be audio and video files that you can practice along with me. Nice short little five minute, three minute, experiential learning associated with it as well. So yeah. September 2023.



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**Arpita:** Amazing. Well, we are so excited for you. We appreciate all of the contributions you've made today and all the information that you've shared with our guests. And I look forward to hearing and seeing all the things that you continue to do. And I saw a little nugget about a excursion also abroad, so I can't wait to hear more about that. And, and we wish you well, Robyn, thank you for joining us today.

**Robyn:** Thank you so much for having me. It's been an honor.

**Arpita:** All right. You take care. Thank you guys. We appreciate everybody tuning in.

**Michael:** We'll see you next time on Doctors Living Deliberately.

**Arpita:** All right, bye-bye.