

# Back to Basics: Diet and Exercise

**D**octors face enormous pressures each day to deliver quality health care. Their number-one priority is keeping their patients healthy—but do they risk their own health in the process?

Physicians are just as likely to develop heart disease, high blood pressure, cancer, diabetes, and other life-threatening illnesses as the rest of the population. But sometimes they're too busy helping others to pay attention to their own physical, mental, or emotional needs.

**Physicians are just as likely to develop heart disease, high blood pressure, cancer, diabetes, and other life threatening illnesses as the rest of the population. But sometimes they're so busy helping others to pay attention to their own physical, mental, or emotional needs.**

As medical evidence mounts that lifestyle is a critical factor in maintaining overall health, physicians owe it to themselves and their patients to become leaders in eating healthfully, exercising regularly, and managing stress effectively.

Consider for a moment: How many doctors skip meals and end up grabbing snacks from the hospital vending machine? How many sleep less than six or seven hours each night? How many fail to follow an exercise regimen—beyond walking from the car to their office and back?

Then look at the following statistics:

- A survey taken at a recent American Medical Association convention revealed that 66 percent of the attending doctors were either overweight or obese.
- Physicians are at least as likely as the rest of the population to suffer a health condition (diabetes, heart disease, or surgery) that requires them to take time off from their practices.

- A 2004 meta-analysis found that male physicians have a 40 percent higher rate of suicide than the general population, and women physicians are nearly twice as likely to commit suicide.
- An estimated 1.5 percent of US women physicians have attempted suicide, while 19.5 percent of them have a history of depression.

In a recent article in the *Annals of Internal Medicine*, Lucian Leape, M.D., and John A. Fromson, M.D., of Harvard School of

**“Many physicians possess a strong drive for achievement, exceptional conscientiousness, and an ability to deny personal problems. These attributes are advantageous for success in medicine; ironically, they may also predispose to impairment.”**

Public Health and School of Medicine conclude that as many as one third of all physicians will at one time in their careers have a condition that impairs their ability to perform their jobs.

Certainly job stress plays a role in these numbers. Drs. Leape and Fromson point out that the “normal” stress of medical practice is compounded

today by rising malpractice costs, decreasing reimbursements, pressure to see more patients in less time, high educational debts, and more.

Complicating the situation further is the “physician personality,” say Eugene V. Boisauvin, M.D., and Ruth E. Levine, M.D., in an article published in the July 2001 issue of the *American Journal of the Medical Sciences*. “Many physicians possess a strong drive for achievement, exceptional conscientiousness, and an ability to deny personal problems. These attributes are advantageous for success in medicine; ironically, they may also predispose to impairment.”

This month the American Medical Association and the Canadian Medical Association are co-sponsoring the biennial International Conference on Physicians Health in Ottawa, Ontario. Among the topics discussed will be the effect of healthcare work conditions on physician stress and satisfaction, physicians in disaster situations, work-life balance, and the physician personality.

Physicians may face special challenges, but they also have special knowledge and skills that can help guide them through times of challenge. *Doctor’s Digest* sought out some of the leaders in

the field: physicians and other health professionals who have researched, written about, and lived the challenges that you face each day. In this chapter, they relate what has worked for them.

As usual, prevention is the best medicine. Effective stress management strategies—including healthful eating, regular exercise, and taking time to pursue outside interests—are key to your ability to serve your patients and to keeping the joy of medicine alive.

And just as each patient requires individualized treatment, each physician has to find his or her own solutions and approaches to address life's challenges and stresses. This guide is meant as a starting point, a collection of useful tips and insights provided by doctors themselves who have gotten into good physical shape and found ways to exercise, pursue other interests, and observe healthy eating habits despite tight schedules and professional demands.

## Diet and Exercise

Mark Klion, M.D., admits he's obsessed with exercise. As an orthopedic surgeon at the Manhattan Orthopedic and Sports Medicine Group in New York, N.Y., one of his passions besides medicine is ironman triathlons, which are an extreme form of triathlon in which contenders swim, bike, and run long distances. He has been participating in these competitions for the past nine years.

### Diet Tip

If you already eat a healthy diet but you want to shed a few extra pounds, monitor the amount of food you eat each day, says Craig Phelps, M.D., family and sport medicine physician in Mesa, Ariz. Then find ways to add steps to your day. Build a ten-minute walk into your daily commute (park your car down the street and walk to the office); instead of the elevator, take the stairs. A few minutes here and there can add up to weight loss, he says.

Dr. Phelps explains that 90 percent of weight loss comes from calorie restriction and 10 percent from exercise, so "don't change so much what you're eating, but cut out a third of the volume, and start walking an extra hour a day," he explains. "And you'll lose about a pound each week."

To prepare for these events, he exercises between 10 and 20 hours a week. Almost every weekday morning, he leaves his house around 5:15 and heads to the local gym, where he works out from one to two-and-a-half hours, then drives to his office or the hospital for rounds.

“My young family is usually asleep, so I don’t really compromise my time with them, which is a huge factor in keeping my wife happy,” he says. “I’m in better shape now at the age of 44 than when I was 20. I’m lighter, stronger, fitter, and I feel much better than I did at that young age.”

**If you don’t like to run, don’t run. Swim, cycle, or rollerblade instead. If you pick an activity you like, you’re more likely to engage in it week after week, and may even look forward to it.**

While working out, he never carries a beeper, a cell phone, or a Blackberry. No one interrupts him. It’s alone time during which he can reflect or focus on the day ahead, he says, adding that “it absolutely takes away the stress of the day—it’s better than any antidepressant.”

Making the commitment to exercise is easier if you choose an exercise you enjoy, he says. If you don’t like to run, don’t run. Swim, cycle, or rollerblade instead. If you pick an activity you like, you’re more likely to engage in it week after week, and may even look forward to it.

Dr. Klion also recommends creating and maintaining an exercise log, which can be a real confidence booster in seeing how far you’ve come. Even if you haven’t made as much progress as you’d like, sometimes guilt can act as a powerful motivator to run that extra mile or swim those two extra laps.

If you haven’t exercised for a while, he suggests 30 minutes of aerobic exercise three times a week with some aspect of cardiovascular monitoring, such as a heart-rate monitor, which can provide you with a baseline or reference point. But if you experience pain during the activity and it doesn’t diminish, stop and figure out why it’s happening, says Dr. Klion. Don’t risk unnecessary injuries like strained or pulled muscles.

After a three- or four-week period, increase the duration of the activity, but by no more than 10 percent per week. Dr. Klion rec-

ommends crosstraining like light weightlifting to adapt your muscles to new stresses, to prevent injury, and to keep your muscles toned.

“Once you’ve caught the exercise bug and feel that emotional high or release from it, it becomes something you can look forward to,” Dr. Klion says. “I really feel my endurance in the operating room or on any given day.”

Even if you’re gym-phobic, you can still perform many small activities throughout the day to help you get into better shape. Take the stairs instead of the elevator. Or park your car a little farther from your office’s front door or hospital’s entrance, adds Craig Phelps, D.O., who knows something about juggling schedules. A family and sports medicine specialist, he provides primary care for the Phoenix Suns and Phoenix Mercury professional basketball teams, and he is provost of the A.T. Still University of Health Sciences campus in Mesa, Ariz.

The goal is to exercise for 40 minutes at least four days a week, Dr. Phelps points out, no matter how busy your weekday schedule. If you’re one of those lucky physicians who has two days off a week, then you’re halfway there. It doesn’t matter if you walk for 20 minutes in a shopping mall, then bike ride for another 20 minutes. The key is to do something that gets your body moving and increases your heart rate. If you can’t squeeze in 40 minutes, then work out for 10 minutes or whatever you can spare.

If you’ve been sedentary for quite some time, Dr. Phelps suggests first checking with your doctor about how best to proceed. Sometimes beginners start walking for 10 minutes at a pace comfortable enough to carry on a conversation, then work up to 40 minutes. At that point, you can explore other activities like cycling, swimming, or jogging.

Dr. Phelps says a common mistake that many people make is not extending themselves beyond their daily routine. For example, if you usually walk two miles a day, chances are that your body has already adapted to that level of exercise. Your cardiovascular system is no longer challenged. He says it’s important to do more to get your heart rate up and burn extra calories.

“Exercise helps prevent osteoporosis, cardiovascular disease, primary and secondary infections—there are a lot of reasons to

exercise,” says Dr. Phelps. “Once you start doing it, you feel good. That’s even an extra benefit.”

So is serving as a better role model for your patients. How credible are doctors who tell their patients to lose 20 pounds if they themselves need to drop 30? Patients will take you more seriously if you follow your own advice.

“If a doctor exercises in public, you’re doing a wonderful service for your community because you’re showing your patients that you’re putting your money where your mouth is,” says Mary Jane Minkin, M.D., an obstetrician/gynecologist in private practice in New Haven, Conn., a clinical professor of obstetrics and gynecology at Yale University, and the author of several books on women’s health. “You can become a leader in the community.”

While Dr. Minkin works more than 60 hours each week, she

## Maximize Your Workout

Choosing to exercise is not a day-to-day decision, it’s a lifelong commitment, says Susie Supper, assistant manager and education director at the National Exercise Trainers Association based in Minneapolis. She offers the following tips to help you incorporate exercise into your weekly routine:

**Assess your energy level:** When are you the most energetic—first thing in the morning or late afternoon? Find out what time of day works best for your body and work schedule.

**Be consistent:** Whenever possible, plan to exercise at the same days and times each week. This will help you establish a routine that your office staff can schedule your appointments to accommodate.

**Find a workout buddy:** Whether you jog, cycle, or head off to the local gym, find someone with whom you can routinely exercise—a friend, neighbor, or colleague. Not only will the activity be more enjoyable, but you’ll be more committed to honor that appointment.

**Set goals:** Create strategic, attainable goals. Ms. Supper says a mistake some people make is doing too much right away. This can lead to injuries, discouragement, or burnout. “It takes time to get exercise to be a part of your life,” she says. “You can’t commit to going to the gym five days a week for two hours. Be realistic.”

**Break the cycle:** If you’re having trouble committing to a regular

devotes one hour, three to four times each week, to exercise. Sometimes her patients see her jogging around town or lifting weights at the local gym. Besides the health benefit, she says exercise is an activity that has helped keep her sane since she began practicing medicine 27 years ago.

Still, exercise is a hard sell within the physician community, Dr. Minkin believes. For the past several years, she has suggested that the North American Menopause Society sponsor a health run at the organization's annual meeting. But the other physician members don't appear interested.

"We don't take care of ourselves," says Dr. Minkin. "[Exercise] is the best thing that we have in our control that we can do."

Remember that exercise is less about losing weight and more about managing your health both now and in the future, she points out. Either pay now or pay later.

exercise schedule, consider hiring a trainer. Paying a professional—even for few weeks—adds value to the activity and encourages your commitment to establish exercise as a weekly habit. Maybe you need to evaluate why you're not exercising. Should you alter your office hours or change your perception about exercise? Find out the root cause, and make the necessary changes.

**Ask for help:** Ms. Supper says most gyms offer a full health assessment for a small fee to determine your cardiovascular strength and endurance levels. With this baseline, you can also track your progress. Also, make sure you know how to properly use each piece of equipment. "Never use a piece of equipment that you've never been trained on because you're setting yourself up for failure," says Ms. Supper. You should also ask what machines will help you achieve your goals.

**Develop a backup plan:** If you plan to exercise outdoors, have rain plans. Even if you work out at a gym or health club, you'll need a backup. Create two different exercise plans: one detailing what equipment you will use and for how many minutes, another detailing which machine to use if someone else is using the machine you need. Never sit around waiting for a machine. Your time is too valuable, and it reduces the amount of time you've scheduled for exercise.

**Reward yourself:** If you honor your exercise goals, reward yourself with something special at the end of each week or month.

## You are what you eat

Since exercise and diet go hand-in-hand, physicians must also commit to making healthy food choices. Everyone knows to stay away from the jelly donuts in the physician's lounge or greasy fries in the cafeteria. Still, it's the mentality of "One candy bar isn't going to kill me" that prevents many from developing consistently healthful eating habits.

Among the "crimes" committed by some physicians is embracing fad diets, says Michael D. Ozner, M.D., Medical Co-Director of Wellness and Prevention at Baptist Hospital of Miami, Medical Director of the Cardiovascular Prevention Institute of South Florida, and author of *The Miami Mediterranean Diet* (Cambridge House Publishing, 2005).

**Everyone knows** to stay away from the jelly donuts in the physician's lounge or greasy fries in the cafeteria. Still, it's the mentality of "One candy bar isn't going to kill me" that prevents many from developing consistently healthful eating habits.

New books featuring the latest diet craze routinely become best-sellers. Some are based on sound medical advice, but many go directly against recommendations from the USDA and other nutrition authorities. Dr. Ozner singles out diets low in carbohydrates. Such diets are not good for long-term health because they tend to be loaded with saturated animal fats.

He also points to other ingredients in the typical American diet, such as high-fructose corn syrup, which bulks up the calorie count of many snack foods, or trans-fatty acids (trans fats), which lace many baked goods. Trans fats raise LDL (bad) cholesterol, lower HDL (good) cholesterol, and may increase the risk of inflammatory or metabolic conditions that can lead to strokes and heart attacks. This type of fat has also been implicated in the development of Type 2 diabetes.

"Denmark banned trans fat several years ago," says Dr. Ozner. "In this country, we've been dragging our feet."

Dr. Ozner advocates a diet that has been around for hundreds of years: the "Mediterranean Diet," eaten by residents of Italy, France, and other regions along the Mediterranean Sea. The recipes are inexpensive, tasty, and easy to prepare, and the ingre-

dients can be found at any grocery store. Most importantly, he points out that the health benefits are backed by more than 50 years of science.

“Clinical studies show that a Mediterranean diet and lifestyle will reduce significantly our risk of heart attack, stroke, cancer, diabetes, hypertension, and other inflammatory diseases, such as asthma and arthritis,” says Dr. Ozner. “To me, it makes sense to recommend that physicians—who are running around night and day—begin a Mediterranean diet. This will allow them to lead a healthy lifestyle, especially for people under such high stress.”

Dr. Ozner refers to the Seven Countries Study led by researcher Ancel Keys at the University of Minnesota in the late 1950s. It was the first study to systematically examine the relationship between lifestyle, diet, and rates of heart attack and stroke in seven countries—Yugoslavia, Italy, Greece, the Netherlands, Finland, Japan, and the U.S.

The study revealed that the individual risk-factor relationship to heart attacks was approximately twice as great in the United States as in northern and southern Europe.

Olive oil, which is high in monounsaturated fatty acids, was identified as a key factor. According to researchers at the Division of Epidemiology & Community Health at the University of Minnesota, the study also showed “a strong inverse relationship of monounsaturated fatty acids in the diet to coronary, cancer, and all-cause mortality.” The 20-year follow-up to the study also revealed that “81 percent of the difference among populations in coronary deaths could be explained by average saturated fatty acid intake.”

But it’s not just one ingredient that makes the difference. It’s the combination of all the foods. For example, the Mediterranean diet offers a better balance between omega-3 and omega-6 fatty acids than the typical American diet. It also calls for a variety of fruits, vegetables, nuts, seeds, whole-grain breads, and fish.

Dr. Ozner says studies estimate that most Americans are deficient in omega-3 fatty acids, which protect against physical and mental degenerative diseases and are essential for the formation of new tissue. Deficiencies of these fatty acids may also lead to an increased risk of anxiety, panic attacks, depression, and attention deficit disorder, he says.

According to patient education materials from the Center for Integrative Medicine at the University of Maryland Medical Center, both omega-3 and omega-6 fatty acids are needed to maintain optimal brain function, achieve normal growth and development, stimulate skin and hair growth, maintain bone health, regulate metabolism, and retain reproductive capability. Omega-3's are found in cold-water fish such as salmon, tuna, sardines, trout, and mackerel and in nuts, seeds, and legumes (such as walnuts, flaxseeds, and soybeans). Omega-6's can be found in cereals, baked goods, and most vegetable oils, as well as in eggs and poultry.

## Measure Your Activity

Exercise is sometimes measured in metabolic equivalents or METs. Sitting quietly, for instance, requires the energy of one MET. For the average adult, this is about one calorie for every 2.2 pounds of body weight per hour. So someone who weighs 160 pounds would burn approximately 72 calories an hour while still. If the same person walked at 3 miles per hour for an hour (3.3 METs), he or she would burn 237 calories.

Consider the various activities listed below and their metabolic equivalents. Are you burning enough calories or energy?

<b>Leisure activities</b>	<b>METs</b>
<b>Mild</b>	
Playing the piano	2.3
Canoeing (leisurely)	2.5
Golf (with cart)	2.5
Walking (2 mph)	2.5
Dancing (ballroom)	2.9
<b>Moderate</b>	
Walking (3 mph)	3.3
Cycling (leisurely)	3.5
Calisthenics (no weight)	4.0
Golf (no cart)	4.4
Swimming (slow)	4.5
Walking (4 mph)	4.5
<b>Vigorous</b>	
Chopping wood	4.9

But omega-6's also produce inflammatory prostaglandins that can promote cancer growth. So an imbalance between omega-3 and omega-6 levels can lead to an increased risk of long-term diseases such as heart disease, cancer, asthma, arthritis, and depression. Ideally, the ratio should be four to one, with omega-3 being dominant over omega-6. A typical American diet, however, reverses those ratios and contains 11 to 30 times more omega-6 than omega-3 fatty acids.

Dr. Ozner cites more evidence: "The U.S. Physicians Health Study done a number of years ago looked at physicians who ate one fish meal a week versus those who ate one fish meal a

#### ***Vigorous (continued)***

Tennis (doubles)	5.0
Ballroom (fast) or square dancing	5.5
Cycling (moderately)	5.7
Skiing (water or downhill)	6.8
Climbing hills (no load)	6.9
Swimming	7.0
Walking (5 mph)	8.0
Jogging (10-min mile)	10.2
Rope skipping	12.0
Squash	12.1

#### ***Activities of daily living***

Lying quietly	1.0
Sitting; light activity	1.5
Walking from house to car or bus	2.5
Loading/unloading car	3.0
Taking out trash	3.0
Walking the dog	3.0
Household tasks, moderate effort	3.5
Vacuuming	3.5
Lifting items continuously	4.0
Raking lawn	4.0
Gardening (no lifting)	4.4
Mowing lawn (power mower)	4.5

*Source: Fletcher GF, Balady GJ, Amsterdam EA, et al. Exercise standards for testing and training: a statement for healthcare professionals from the American Heart Association. Circulation. 2001;104:1694-1740.*

month,” says Dr. Ozner. “It found that those who ate one fish meal a week had a 50-percent reduction in their risk of sudden cardiac death. That’s powerful.”

Dr. Ozner says that when he attended medical school more than 26 years ago, nutrition wasn’t included in the curriculum. But now the pendulum has started to swing the other way, he says, because many schools have begun recognizing the importance of diet and nutritional awareness for physicians, who routinely lack sleep and work in high-stress situations.

So what should harried physicians eat on the run? How about raw almonds or walnuts? Dr. Ozner suggests that doctors put some of each in a baggie in their coat pocket for snacking throughout the day. They make a terrific snack, he says, because they’re a good source of protein, fiber, monounsaturated fat, and omega-3 fatty acids. He also favors peanut butter on whole-wheat pita bread. Throw a few almonds in, and sprinkle on a little ground cinnamon, which lowers bad cholesterol and blood sugar. Dr. Ozner says this is a powerful and portable snack that doesn’t require refrigeration, and it takes less than 60 seconds to prepare.

## Pills vs. Food

Perhaps one of the reasons doctors don’t eat healthfully is that they share the same false perception as many of their patients: that heart attacks, cancer, or other deadly illnesses will strike somebody else—but not them. Or, perhaps, they too have succumbed to the quick-fix mentality that a pill will make us all better. Let’s face it: Making long-term dietary changes requires a sustained effort.

Joel Fuhrman, M.D., author of *Cholesterol Protection for Life* (Gift of Health Press, 2004), says we are missing the mark—and an opportunity for true healing. A family physician for the past 15 years, Dr. Fuhrman specializes in nutritional medicine in Flemington, N.J. He believes that inadequate nutrition may be at the root of many diseases, and that physicians rely too heavily on medication to treat most health issues, while underestimating the value of proper nutrition.

He says the key is nutritional diversity, which you don’t get by taking a vitamin pill that contains a fraction of the nutrients

found in natural food sources. Still, many people don't take time for a nutritious diet and rely too heavily on supplements like vitamins C, E, and B6 pills.

Excessive amounts of these vitamins can be dangerous—there can be serious side effects of megadoses of supplements. In addition, with vitamins alone, you don't get the full advantages of foods that may protect against a host of conditions—from heart attacks to premature aging. By being deficient in produce-derived foods that contain antioxidant chemicals, your body becomes more vulnerable to the damaging effects of stress, he says. Instead, he recommends relying on fresh food, and experimenting with new flavors and combinations. At the very least, include one-half cup of beans and nuts or seeds, and more vegetables, berries, and other fruits in your daily diet.

To consume his recommended portion of vegetables each day, Dr. Fuhrman sometimes makes a giant pot of cruciferous vegetable soup on Sunday, then freezes it into daily portions to take

### Time Required for an Average 150-lb Adult to Burn 150 Calories

Intensity	Activity	METs	Duration in minutes
Moderate	Volleyball, noncompetitive	3.0	43
Moderate	Walking, moderate pace (3 mph, 20 min/mile)	3.5	37
Moderate	Walking, brisk pace (4 mph, 15 min/mile)	4.0	32
Moderate	Table tennis	4.0	32
Moderate	Raking leaves	4.5	32
Moderate	Social dancing	4.5	29
Moderate	Lawn mowing (powered push mower)	4.5	29
Hard	Jogging (5 mph, 12 min/mile)	7.0	18
Hard	Field hockey	8.0	16
Very hard	Running (6 mph, 10 min/mile)	10.0	13

Source: *Physical Activity and Health: A Report of the Surgeon General, 1996*  
<http://www.cdc.gov/nccdphp/sgr/sgr.htm>.

to work the following week. Cruciferous vegetables, such as broccoli, cauliflower, brussels sprouts, cabbage, radishes, and kale, contain isothiocyanates, which stimulate your body to break down potential carcinogens and prevent normal cells from becoming cancerous. (See recipe in box.)

## Healthful Habits

Does the kitchen in your office have a refrigerator? What's in it? Coffee creamer and bottled water? Put the electricity to better use by stocking the refrigerator with a variety of fruits and vegetables so that eating well at work will become more appealing, adds Molly Morgan, a registered dietician. Ms. Morgan owns Creative Nutrition Solutions, a nutrition consulting firm in Vestal, N.Y., that works with physicians and medical practices.

"Doctors' lives are so hectic that making healthy eating a priority is a challenge," she says. "This is about living a healthy lifestyle and fueling your body with the right types of stuff."

Start by making a plan, Ms. Morgan advises. Who is going to purchase the food? How often will this person need to go shopping? Who will pay for it? At some large offices, Ms. Morgan says the office manager goes to the market. At small offices, sometimes the nurse practitioner and doctor trade off.

Other tips: Keep granola bars in the glove box of your car for snacking when you're running around town or traveling between your office and the hospital, adds Ms. Morgan. Also keep a bottle of water handy. By drinking a few sips here and there, you won't have any trouble meeting your body's fluid requirements, especially during the hot summer months.

Ms. Morgan says some doctors also provide her with a list of their favorite local restaurants. She reviews their menus and helps them construct nutritious options. While doctors are certainly capable of identifying the more healthful dishes, she says they often dine out at the end of the day; if they're tired, they may order out of habit or according to their taste buds. By identifying tasty and nutritious options, she helps them eliminate the risk of making poor, last-minute choices.

Most people eat two or three times a day. But smaller meals eaten more often during the day can be a more healthful option for many people. Consider eating five times a day, says Andrea

Pennington, M.D. She practices age-management medicine at The Pennington Empowerment Group in Silver Spring, Md., which focuses on fitness, nutrition, lifestyle, and hormonal balance to promote longevity and prevent disease. Dr. Pennington is also a health expert for [www.lime.com](http://www.lime.com), a Website (owned by Steve Case's Revolution Living) that connects consumers with experts to help them lead healthier, more balanced lives.

Most physicians tell her they barely have time to return patient calls or talk to their kids, let alone take time for five small meals. "But it's really about keeping your energy level up to be able to focus, not be moody, and maintain a healthy weight. You really need to be eating three small meals and two snacks every day,"

### Super Cruciferous Soup

(approximately 10 servings)

Dr. Fuhrman recommends this soup recipe, which he encourage his own consumption of healthy cruciferous vegetables. Bring this soup or other healthful foods with you to eat at work. It might produce a desirable side effect: you won't be tempted to devour that cream-filled donut or raid the vending machine for chips or chocolate bars.

- 2-pound mixture of kale, collards, and broccoli rabe
- 1 cup broccoli sprouts
- 3 stalks of well-cleaned leeks cut into 3-inch rounds
- 4 zucchinis, cut into chunks
- 3 onions, quartered
- 8 ounces of mushrooms, diced
- 2 carrots, diced
- 3 parsnips, diced
- ½ cup split peas
- ½ cup lentils
- ½ cup adzuki beans
- 20 ounces carrot juice
- 10 ounces celery juice
- 20 ounces water
- 2 tablespoons powdered vegetable seasoning (or other seasonings of choice, to taste)

Combine all ingredients and cover and simmer until legumes are tender. Blend onions, broccoli sprouts, broccoli rabe, collards, kale, zucchinis, and leeks, then mix back into soup base.

she says.

Despite her own busy schedule, Dr. Pennington starts her day with a bowl of steel-cut oatmeal, fresh berries with Kashi (a high-protein, low-fat, high-fiber cereal) or a scrambled egg with spinach and turkey bacon with fruit on the side. Each dish can be consumed in 10 or 15 minutes and provides good fuel to start your day. She believes the human body is intended to re-fuel

## Mood Eating

Some foods can affect your mood or even enhance your performance in the exam or operating room. For instance, next time you face an intellectually demanding task, eat lean proteins like fish, chicken, eggs, or low-fat dairy products such as yogurt and cheeses, says Debbie Mandel, a fitness and stress-management expert in Long Island, N.Y., and author of *Changing Habits: The Caregivers' Total Workout*.

"The brain uses amino acids derived from the protein in food for its complex network of neurotransmitters," says Ms. Mandel. "The body uses amino acids, too, so the brain and body compete for it. You have to feed the brain concentrated protein to increase absorption."

Ms. Mandel suggests other foods whenever you feel the following symptoms:

**Slight depression:** Eat foods with complex carbohydrates to increase your serotonin levels—oatmeal, a sweet potato, multigrain breads, whole-wheat pasta, or brown rice. Likewise, eat foods rich in omega-3 fatty acids such as salmon, herring, tuna, sardines, mackerel, crushed flaxseed, and walnuts, or spread peanut butter or almond butter on whole-wheat bread.

**Fatigue:** Eat high-fiber foods like fruits and vegetables, beans, and other legumes, which push foods through the digestive system faster. Also drink plenty of water, especially since fiber needs water to work. Here's a delicious high-fiber drink you can make: combine spinach, kale, cabbage, parsley, watercress, and celery into a juicer with some apple, beets, and carrots to remove the bitter taste. It won't throw your sugar levels off and is rich in enzymes.

**Insomnia:** Drink a glass of warm milk or eat multi-grain crackers, turkey, tuna, dates, figs, bananas, or yogurt. Ms. Mandel says they contain tryptophan, which relaxes the brain. Avoid foods that contain sugar or caffeine, stay away from salami and other processed meats, aged cheese, beer, and red wine because they contain tyramine, a brain stimulant.

itself every three or four hours; that's the way it metabolizes food most efficiently.

A few hours later, she'll snack on a cheese stick with a handful of almonds or nuts. The nuts satisfy hunger, she says, and won't turn on insulin production, which puts the body into fat-storage mode. Those who skip the mid-morning snack before lunch may only sabotage their weight-loss efforts, since they end up overeating at noontime, she says.

For lunch, Dr. Pennington sometimes eats a salad with tuna, which is easy to prepare. Then for her mid-afternoon snack, she'll munch on carrots, fruit, or yogurt. Her last meal of the day is dinner, usually before seven o'clock.

Some believe they'll lose weight or achieve better health if they eat only once a day. Since your body cannot break down a lot of food at once, it ends up storing it as excess fat. So the one-meal-a-day diet can actually cause you to gain weight and lose energy and focus throughout the day.

People also underestimate the importance of water, Dr. Pennington says. She points out that the human brain is between 75 percent and 80 percent water. Remember the last time you felt drained or hungry around three o'clock in the afternoon? She says, "You may have needed not food but water."

"Drinking tons of water has given me a lot more pep in my step," says Dr. Pennington. "We have to stay well-hydrated to keep our body running efficiently. Often you'll find that [drinking water] alone takes care of any hunger pains and that you're not eating something that you shouldn't. It keeps you healthier."

**Most people eat two or three times a day. But smaller meals eaten more often during the day can be a more healthful option for many people. Consider eating five times a day.**