

Extraordinary Health for Busy Healthcare Professionals

(This Means You!)

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How many of you consider your health extraordinary right now?

- ▶ Plenty of energy?
- ▶ No unpleasant symptoms?
- ▶ Healthy diet?
- ▶ Ideal body weight (BMI)?
- ▶ Strong, flexible, pain-free body?
- ▶ Exercise program includes aerobics most days, weight training twice weekly, and flexibility exercises?
- ▶ Up-to-date on health screens, examinations, and vaccinations?
- ▶ Mental wellbeing?
- ▶ No self destructive bad habits?

Self Destructive Bad Habits

- ▶ **Smoking**
- ▶ **Poor Diet:** excessive calories, processed foods, and salt; high in fat, sugar and simple carbohydrates; excessive animal products and inadequate fruits and vegetables
- ▶ **Excessive alcohol**
- ▶ **Soft drinks**
- ▶ **Drugs:** illicit or excessive prescription drugs (opioid addiction epidemic)
- ▶ **Sedentary lifestyle:** excessive time at computer, in car, tv, no exercise
- ▶ **High risk behaviors**

OUCH!

What's between you and extraordinary health...?

- ▶ Time?
 - ▶ Motivation?
 - ▶ Habits?
 - ▶ Overcoming Inertia?
 - ▶ Fear?
 - ▶ Resignation?
 - ▶ Low self-esteem?
 - ▶ “Good” excuses?
 - ▶ Denial?
- ?

Denial

Code (or treat) acute and chronic diseases of other people,
yet somehow believe:

- ▶ It doesn't apply to me
- ▶ I'm not that bad
- ▶ It won't happen to me
- ▶ I won't get that (disease) if I don't get tested for it
- ▶ Total disconnect- I don't think about it at all...

You obviously know a lot about health and diseases, but **what are you doing for health maintenance and prevention yourself?**

Prevention

- ▶ Primary- prevent disease in the first place
- ▶ Secondary-manage disease when detected but before complications develop
- ▶ Tertiary-management of complications of existing disease state to reduce morbidity and mortality and improve quality of life

Examples from the audience please!

Primary Prevention

- ▶ Vaccinations Z23
- ▶ Maintain ideal body weight (BMI >19 and <25)
- ▶ Healthy diet- i.e. Mediterranean, Traditional Japanese, plant-based,
Dietary Guidelines for Americans 2015-2020
- ▶ Exercise most days and be active every day
- ▶ Limit alcohol to daily max of 4-5 oz wine for women or 8-10 oz wine for men (red
best)

Primary Prevention

- ▶ Never start smoking/ quit if you do smoke
- ▶ Stress management
- ▶ Coffee in moderation may prevent Type II DM (be careful what you add to it)
- ▶ Adequate sleep
- ▶ Avoid high risk behaviors
- ▶ Social engagement

Primary prevention: prevent diseases in the first place

i.e. Weight/BMI

Maintain ideal body weight

($BMI > 19$ and < 25)

Lose excessive weight **before**
overweight, obesity, or morbid obesity
cause diseases or complications

Any amount of weight loss makes a
difference!

Examples of diseases and complications of obesity

CVD

Stroke

Diabetes mellitus/Metabolic Syndrome

Hypertension

Hypercholesterolemia

Osteoarthritis

Sleep apnea

Plantar fasciitis

Etc...

BMI table: What is yours?

WEIGHT lbs	100	105	110	115	120	125	130	135	140	145	150	155	160	165	170	175	180	185	190	195	200	205	210	215
kgs	45.5	47.7	50.0	52.3	54.5	56.8	59.1	61.4	63.6	65.9	68.2	70.5	72.7	75.0	77.3	79.5	81.8	84.1	86.4	88.6	90.9	93.2	95.5	97.7
HEIGHT in/cm	Underweight				Healthy				Overweight				Obese				Extremely obese							
5'0" - 152.4	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42
5'1" - 154.9	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	
5'2" - 157.4	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39		
5'3" - 160.0	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38		
5'4" - 162.5	17	18	18	19	20	21	22	23	24	24	25	26	27	28	29	30	31	31	32	33	34	35	36	37
5'5" - 165.1	16	17	18	19	20	20	21	22	23	24	25	25	26	27	28	29	30	30	31	32	33	34	35	35
5'6" - 167.6	16	17	17	18	19	20	21	21	22	23	24	25	25	26	27	28	29	29	30	31	32	33	34	34
5'7" - 170.1	15	16	17	18	18	19	20	21	22	22	23	24	25	25	26	27	28	29	29	30	31	32	33	33
5'8" - 172.7	15	16	16	17	18	19	19	20	21	22	22	23	24	25	25	26	27	28	28	29	30	31	32	32
5'9" - 175.2	14	15	16	17	17	18	19	19	20	20	21	22	22	23	24	25	25	26	27	28	28	29	30	31
5'10" - 177.8	14	15	15	16	17	18	18	19	20	20	21	22	23	23	24	25	25	25	26	27	28	28	29	30
5'11" - 180.3	14	14	15	16	16	17	18	18	19	20	21	21	22	23	23	24	25	25	26	27	28	28	29	30
6'0" - 182.8	13	14	14	15	16	17	17	18	19	19	20	21	21	22	23	23	24	25	25	26	27	27	28	29
6'1" - 185.4	13	13	14	15	15	16	17	17	18	19	19	20	21	21	22	23	23	24	25	25	26	27	27	28
6'2" - 187.9	12	13	14	14	15	16	16	17	18	18	19	19	20	21	21	22	23	23	24	25	25	26	27	27
6'3" - 190.5	12	13	13	14	15	15	16	16	17	18	18	19	20	20	21	21	22	23	23	24	25	25	26	26
6'4" - 193.0	12	12	13	14	14	15	15	16	17	17	18	18	19	20	20	21	22	23	23	24	25	25	26	26

BMI Calculation

BMI FORMULA

USA **BMI**= $703 \times \frac{\text{weight (lb)}}{\text{height}^2 (\text{in}^2)}$

METRIC **BMI**= $\frac{\text{weight (kg)}}{\text{height}^2 (\text{m}^2)}$

Are these just codes and concepts?

E66.3 Overweight? BMI 25-29.9

E66.09 Obese? BMI 30-34.9

(30-39.9 if without complications due to obesity)

E66.01 Morbidly Obese? BMI 40 and above

(BMI 35 and above if complications due to obesity are documented)

Obesity is a public health crisis...

Over 70% of adults in USA are considered **overweight or obese**.

Nearly 38% of American adults are **obese**.

6.3% of those are **morbidly obese**.

Over 20% of **adolescents**, 17% of **children 6-11yrs old**, and over 9% of **children 2-5yrs old** are **obese!**

If your BMI is 25 or greater:

What is your **story** about why you can't lose weight?

can't stick with healthy diet?

can't exercise?

What diets have you tried that failed?

Why did they fail?

Why did you give up?

Success

What diets have you tried that worked?

When a diet worked, what motivated you?

Were you able to maintain your healthier weight?

Success

Who has made a **healthy diet** a part of their lifestyle,
and how?

Who **exercises** regularly?

What do you do to make these **lifestyle choices** successful?

Secondary prevention-manage disease when detected but before complications develop

Examples of diseases and complications of overweight/obesity/morbid obesity?

Morbid Obesity(by definition, “morbid” means “morbidity”)

- ▶ BMI > 40
- ▶ BMI > 35 if document complications that qualify for HCC
 - E11.9 Type 2 DM without complications
 - I10 Hypertension
 - CVD
 - Stroke
 - CHF
 - Sleep apnea
 - Osteoarthritis Knees-bilateral
- ▶ BMI >30 alveolar hypoventilation syndrome

Tertiary prevention- management of complications of existing disease state to reduce morbidity and mortality and improve quality of life

Type 2 DM with complications: kidney, ophthalmic, neurologic, vascular, ulcers, etc...

Hypertension with CKD, heart complications, CVA, etc...

CVD: MI, CHF

Stroke: sequelae, hemiplegia, prevent bedsores

Sleep apnea: daytime drowsiness, falling asleep while driving, HTN, Atrial Fib, MI, CVA

Osteoarthritis Knees-bilateral: joint replacement, more risky if morbidly obese and DM

What could you do differently to succeed?

Start with small weight lose goals that you can face.

Ultimately aim for BMI <25.

Lose weight before complications develop or worsen.

Get enough sleep (6-8 hrs). Inadequate sleep causes weight gain.

What could you do differently to succeed?

Any amount of weight loss makes a difference!

Make exercise and activity a regular part of your lifestyle.

Mindfulness- including mindful eating and for stress management

Maslow's Hierarchy of Needs

- ▶ Abraham Maslow “A Theory of Human Motivation”, Psychological Review, 1943

Human needs: the most basic needs must be met before people will focus their motivation on betterment, self-actualization, higher level needs.

- ▶ Physiologic needs most important- food, water, shelter
- ▶ Then safety (physical and economic)
- ▶ Love and belonging (relationships, family, friends, community)
- ▶ Esteem and respect (by self and others)
- ▶ Self actualization (full potential)

Basic needs must be met by providers and patients to realize full potential (includes optimizing health)

It all starts in your mind and mental attitude...

- ▶ What motivation would it take that would be big enough to move you into action?
- ▶ You already know what you need to do...
- ▶ Why wait for a wake-up call? (like a heart attack, diabetes, or other health problem).
- ▶ Go for a goal that inspires you and fires you up!

For me: Pain



First dance competition

Dress for Latin dancing:
OMG, you've got to be
kidding!

(Told I was full figured..)

“Back Fat Diet” was
born...



How about training for old age?

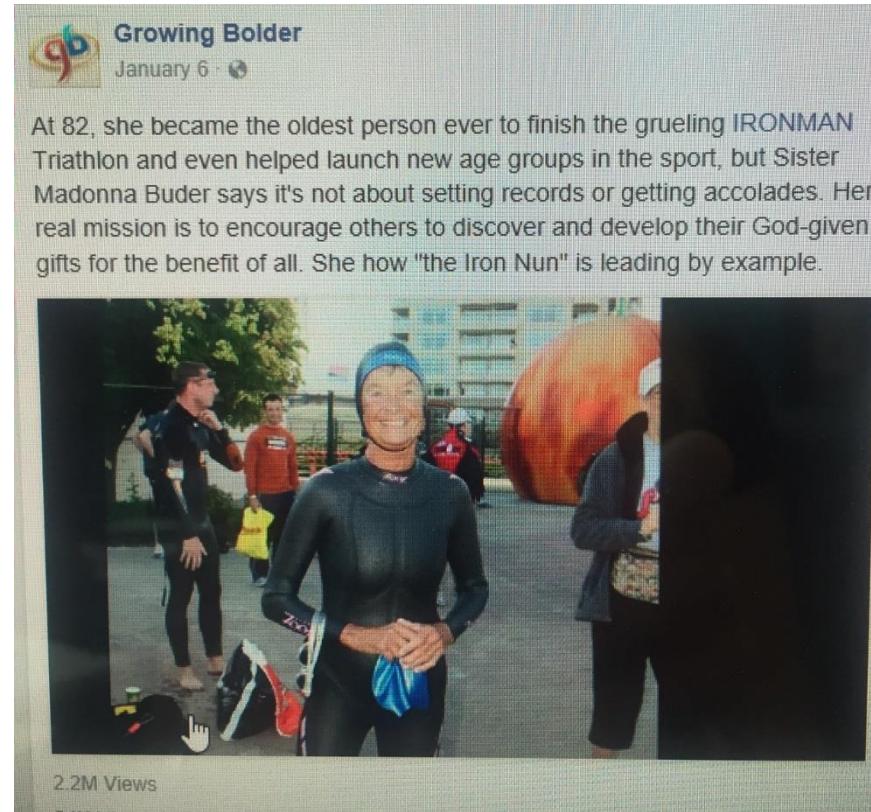


Sister Madonna Buder age 82 Ironman Triathlete and Marathon Runner



Growing Bolder
January 6 ·

At 82, she became the oldest person ever to finish the grueling IRONMAN Triathlon and even helped launch new age groups in the sport, but Sister Madonna Buder says it's not about setting records or getting accolades. Her real mission is to encourage others to discover and develop their God-given gifts for the benefit of all. She is how "the Iron Nun" is leading by example.



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2.2M Views

Vard Margaryan and
Tao Porchin-Lynch age 96
on America's Got Talent
(holds Guinness record)
photo by Eric Leibowitz/NBC



Vard Margaryan and
Josie Lee age 85



Dancing Makes You SMARTER

The 21-year study of senior citizens, 75 and older, was led by the Albert Einstein College of Medicine in New York City, funded by the National Institute on Aging, and published in the New England Journal of Medicine.

% = Reduced Risk of Dementia

0% in Bicycling, swimming or playing golf

35% in Reading

47% in Doing crossword puzzles at least four days a week

76% in Dancing Frequently

Dancing:

- Reduces stress and depression
- Increases energy and serotonin
- Improves flexibility, strength, balance, endurance
- Strengthens bones and boosts cardiovascular health
- Increases mental capacity by exercising our cognitive processes
- Dynamic and rapid-fire decision making, creates new neural paths.

David Avocado Wolfe

Celebrate Life Through Dance

Leisure Activities and the Risk of Dementia in the Elderly-New England Journal of Medicine

Joe Verghese, M.D., Richard B. Lipton, M.D., Mindy J. Katz, M.P.H., Charles B. Hall, Ph.D., Carol A. Derby, Ph.D., Gail Kuslansky, Ph.D., Anne F. Ambrose, M.D., Martin Sliwinski, Ph.D., and Herman Buschke, M.D. N Engl J Med 2003; 348:2508-2516 [June 19, 2003](#) DOI: 10.1056/NEJMoa022252

Other motivators for me...

Family History: Type II Diabetes, MI, Obesity

Fatigue: large meals or too many carbs

I don't like shopping! Don't want to buy new clothes unless they are smaller sizes...

I've witnessed the complications of being overweight, obese, or morbidly obese during my 20 years of medical practice and chart reviews. Other people's consequences were a **wake-up call** for me!

Self Esteem: a victory over my own disempowering self talk!

How about you?

What could you do differently to succeed?

- ▶ Choose a diet with foods that are delicious to you as well as healthy and low calorie
- ▶ Plan ahead/make healthy food readily accessible
- ▶ Shop smartly and proactively-learn nutritional values of foods
- ▶ Consider replace one meal a day with a protein shake or bar
- ▶ Eat breakfast
- ▶ Space meals/snacks at regular intervals

What could you do differently to succeed?

- ▶ Support group/ get a buddy
- ▶ Keep a food diary (and be honest)
- ▶ Make healthy eating a lifestyle choice instead of a short-term fix
- ▶ Don't eat late at night- consider 12 hour fast
- ▶ Drink a lot of water (1/2 ounce/lb. bodyweight/day)
- ▶ Drink water when hungry, then wait ten minutes before eating

Mindfulness

- ▶ Eat mindfully and enjoy your food fully
- ▶ Don't eat while working, at your desk, while driving, watching tv, etc..
- ▶ Take 4 deep breathes to reduce stress before eating
- ▶ Chew food longer and eat slower
- ▶ Eat when hunger is a 7/10, and stop when hunger is 3/10 (don't overeat)
- ▶ Resist temptation when high calorie foods are offered or available
- ▶ Be mindful not to binge eat and drink on holidays

Exercise

- ▶ American Heart Association recommends 150 minutes per week of moderate exercise or 75 minutes per week of vigorous exercise. Walking is a good choice. It's not all about the gym...
- ▶ 30 min per day 5 times per week (most days). Ok to do in 10-15 min increments. Take breaks!
- ▶ Plus moderate to high intensity muscle conditioning (weight training, pilates) at least two days per week
- ▶ If HTN or hyperlipidemia, 40 min moderate to vigorous exercise 3-4 times per week

Risks of Sedentary Lifestyle

- ▶ Cardiovascular disease
- ▶ Hypertension
- ▶ Anxiety and depression
- ▶ Increased risk of some cancers

Heart disease is the number one cause of death in women and men.

Regular exercise reduces risk factors even if you are obese or overweight!

Exercise reduces Type II DM

Diabetes Prevention Program study showed that among people who were at risk for Type II DM,

50% of the participants who exercised 150 min/week in the study

lost 7% of their body weight

and decreased their risk of developing DM over 3 yrs by 60%.

Exercising 150 min/week also **reduces blood sugar, blood pressure, and lipids.**

Tex Heart Inst. J. 2012; 39(2):224-227

Think Exercise and Daily Activities!

- ▶ Take breaks while working and move
- ▶ Walk a minimum of 30 minutes per day, 5 days per week
- ▶ Stand up and walk in place while on the phone or waiting for computer

Think Exercise and Daily Activities!

- ▶ Choose active hobbies, not sitting and watching television (unless you're sitting on a stationary bike!)
- ▶ Try combining spending quality time with family or friends with physical activities, sports, or exercise
- ▶ Exercise mindfully

Z23 Vaccinations: CDC recommendations for healthy adults

VACCINE ▼	AGE GROUP ►	19-21 years	22-26 years	27-49 years	50-59 years	60-64 years	≥ 65 years
Influenza ^{2,*}					1 dose annually		
Tetanus, diphtheria, pertussis (Td/Tdap) ^{3,*}				Substitute 1-time dose of Tdap for Td booster; then boost with Td every 10 yrs			
Varicella ^{4,*}				2 doses			
Human papillomavirus (HPV) Female ^{5,*}		3 doses					
Human papillomavirus (HPV) Male ^{5,*}		3 doses					
Zoster ⁶						1 dose	
Measles, mumps, rubella (MMR) ^{7,*}		1 or 2 doses					
Pneumococcal polysaccharide (PPSV23) ^{8,9}			1 or 2 doses			1 dose	
Pneumococcal 13-valent conjugate (PCV13) ¹⁰				1 dose			
Meningococcal ^{11,*}				1 or more doses			
Hepatitis A ^{12,*}				2 doses			
Hepatitis B ^{13,*}				3 doses			

Early detection and screenings

- ▶ Early detection and screenings are not prevention, they are tests looking for disease processes that have already started.
- ▶ Early detection and screenings are a very important part of health maintenance.
- ▶ Screenings are done for patients who are asymptomatic without prior history of the condition being screened for.
- ▶ STARs places a heavy emphasis on Medicare Advantage members keeping their screenings and vaccinations up-to-date. Are yours?

US Preventative Services Task Force (USPSTF)

Recommendations for adults

(not all medical societies agree with them)

- ▶ **Breast cancer screening:** biennial 50-74, 40-50 is individual decision
- ▶ **Cervical Cancer screening:** 21-65 PAP every 3 yrs, or PAP plus HPV testing every 5 yrs (if 30-65)
- ▶ **Chlamydia and gonorrhea screening** on all women under 24 or if sexually active (high risk) over 24
- ▶ **Screening** on women who have family members with breast, ovarian, tubal, or peritoneal cancer for possible BRCA testing

US Preventative Services Task Force (USPSTF) Recommendations for adults

- ▶ **Osteoporosis:** Women 65 and older (younger if high risk or previous fracture)
- ▶ **Colorectal Cancer screening:** 50-75 (75-85 maybe, depends on health and life expectancy) FIT (Fecal Immunochemical test) every year, FIT-DNA every 3 yrs, or colonoscopy every 10yrs. (if normal)
- ▶ **Abdominal Aortic Aneurysm-** screen male smokers 65-75
- ▶ **Prostate Cancer screening:** recommendation is being re-evaluated/pending

US Preventative Services Task Force (USPSTF) Recommendations for adults

- ▶ **Hepatitis C screening** if born 1945-1965 or high risk
- ▶ **HIV screening** age 15-65
- ▶ **Tb screening** *if at high risk*
- ▶ **Lung Cancer screening:** annual LDCT age 55-80 if 30 yr. pack-year history in those who smoke or quit within last 15 yrs
- ▶ **Tobacco smoking cessation** counseling and pharmacologic treatment prn

US Preventative Services Task Force (USPSTF) Recommendations for adults

- ▶ **Depression, alcohol abuse, and domestic violence** screening and counseling
- ▶ **BMI**- refer for intensive counseling if BMI 30 or > or CVD risk factors
- ▶ **BP**
- ▶ **Diabetes**: screen for abnormal glucose if 40-70 yrs and overweight or obese, earlier if high risk.

Hypertension Control

- ▶ JNC 7 (Joint National Committee on Prevention, Detection, Evaluation & Treatment of High Blood Pressure) reports that **people with normal BP at age 55 still have a 90% chance of developing HTN.**
- ▶ Target BP may vary according to studies, your doctor's opinion, your age and medical history.
- ▶ JNC 8 (2014) loosened target BP control to 150/90 if > 60yrs (140/90 if younger) from JNC 7 (2003) that advocated BP less than 140/90 (130/80 if CKD or DM).
- ▶ However, the SPRINT study (Nov 2015- New England Journal of Medicine) showed that an intensively treated blood pressure group (with **average systolic 121.4mm Hg**) had significantly **lower incidence of strokes, heart attacks, heart failure, and CV deaths** than the control group (with average systolic BP 136.2mm Hg).

US Preventative Services Task Force (USPSTF) Recommendations for adults

- ▶ Take low dose aspirin age 50-59 (with 10% or more 10 yr. CV event risk) to **reduce risk of CV event** and **colorectal cancer**. May benefit age 60-69 if can tolerate ASA.
- ▶ Risk Factors for CVD?
- ▶ Take a statin drug for primary prevention of CVD age 40-75 with 1 or more risk factor for CVD (and 10% or more 10 yr. CV event risk)

Risk Factors for CVD

- ▶ Obesity
 - ▶ Hypertension
 - ▶ Smoking
 - ▶ Physical inactivity
 - ▶ Advanced age
 - ▶ Post-menopausal
 - ▶ Family history CVD
 - ▶ Poor diet
 - ▶ Hyperlipidemia
 - ▶ Diabetes mellitus
 - ▶ Excessive stress (heart.org)
- AHA tools for stress management

Z73.3 Stress Not Otherwise Classified



Z73.1
Type A personality

R45.4
Irritability and anger

Z73.2
Lack of relaxation
and leisure

R45.2
Unhappiness

Z73.0
Burnout

R45.3
Apathy

47

etc....

Importance of the doctor/patient relationship to outcomes and compliance

Patient trust and confidence in provider improves:

- ▶ Patient compliance and outcomes with treatment and preventative health maintenance
- ▶ Patient satisfaction and STARS ratings
- ▶ Establish a good relationship and partnership with your doctor/ find someone that you trust

Not optional: integral part of treatment

General Adult Medical Exams and Screenings

Examinations done on people with no complaints, signs, or symptoms.

Z00.00 Encounter for general adult medical examination **without** abnormal findings

Z00.01 Encounter for general adult medical examination **with** abnormal findings

When **abnormalities** found on examinations or screenings, **diagnosis** is made, **treatment** is prescribed, **then it is up to you**, the patient, to **comply with any advised lifestyle changes (and medication if necessary)**.

Z91 Personal Risk Factors NOC

Z91.11 Patient's noncompliance with **dietary regimen**

Z91.14 Patient's other noncompliance with medication regimen

Obstacles to compliance

- ▶ **Will to Live-** may not be motivated for preventative measures if depressed, socially isolated, suffering from chronic pain or symptoms of chronic diseases
- ▶ “Slow suicide” with **self destructive bad habits** is expensive and decreases quality of life

Successfully Adopting Healthy Lifestyle

- ▶ Identify goals and the things that are **meaningful** to you, important enough to make lifestyle changes and take necessary actions for **mental and physical health maintenance or improvement**
- ▶ Use positive self talk. Give up the words “I can’t”, “I’m too tired”, and any other disempowering mind chatter.
- ▶ Keep your word to yourself regarding diet, exercise, and lifestyle changes
- ▶ Get your physical examinations, screenings, and vaccinations up-to-date.
- ▶ Enjoy having more energy and vitality, better quality of life, and self esteem that comes with knowing what you are capable of doing.