LEARNING OBJECTIVES

- Define Lifestyle Medicine as it applies to physical therapy practice.
- Identify the key economic and societal health determinants that drive physical therapy outcomes.
- Describe the systems-based biopsychosocial model of assessment and its parts.
- Evaluate tools and measures for assessing biopsychosocial well-being and health risk.
- Identify the roles of the physical therapist within Lifestyle Medicine.

BARRIERS TO OPTIMAL OUTCOMES

What are the biggest barriers you face in getting the outcomes you want in patient care?

BARRIERS TO OPTIMAL OUTCOMES

- Access
- Health Literacy
- Adherence
- Comorbidity

ACCESS

[Graph showing data]
Assessing Literacy Skills in Adult Patients

Scoring the REALM

Physical Activity Promoting Approaches

ADHERENCE

Patient adherence (Simmons et al 2007), satisfaction, and outcomes are determined by an individual's health beliefs and literacy, ultimately dictating their willingness and ability to change, especially in vulnerable populations (Green et al 2004).
INFLUENCING CHANGE READINESS

Strategies for successful interaction with patient:
- Transtheoretical Model (Stages of Change)
- DBT modified interviewing in chronic care
- FOCUS: self-efficacy and locus of control

TRANSTHEORETICAL MODE

-1. Unaware
-2. Aware
-3. Realized benefits
-4. Active
-5. Initial goals reached

COMORBIDITY

Most common chronic experience in adults -7:9 MORBIDITY

Most common chronic experience in adults -7:9 MORBIDITY

NO. 01

What has changed in our society that has made Lifestyle Medicine in PT necessary?
WHAT IS LIFESTYLE MEDICINE?

American College of Lifestyle Medicine
1. Nutrition - dietary supplements, food as medicine, functional foods
2. Physical activity - entire spectrum of movement from anaerobic to aerobic, from mild to vigorous
3. Stress management & behavioral modification - mind-body medicine, psychosocial influences, social networks
4. Environmental exposure - contaminants in air, food, water, soil, radiation
5. Smoking/Cessation

LIFESTYLE MEDICINE PT PRACTICE
A BPS MODEL OF HEALTHCARE
1. Nutrition - anti-inflammatory diet, gut microbiome support, genetic considerations
2. Exercise - safe, individualized, fun, attainable, balanced strength endurance, posture considerations
3. Sleep, Immune & Safety
4. Smoking/Cessation
5. Stress Management - regulation of emotions, mindfulness, relaxation, music, meditation, mood, reflexology
6. Social Support - interconnected communities, social Kent, mental health

HOLISTIC PHYSICAL THERAPY PRACTICE MODEL

NUTRITION
- Nutrition - anti-inflammatory diet, gut, microbiome support, genetic considerations
- Low-carb diet considerations: balance calorie intake, decrease overall intake, increase activity
- Personalized nutrition depends on: age, lifestyle, genetics, physical activity, family history, ancestry, nutrition and stress, stress, medications, supplements, frequency of travel, home location, environment, sleep, genetics, exercise

[Diagram of holistic physical therapy practice model]
NUTRITION SCREENING

- Use nutrition knowledge tools to screen for: malnutrition, phytochemical utilization, and vitamin intake.
- Nutritional Assessment: http://www.nap.edu
- Consider measuring BP, BMI, pulse, BMI, and body fat.
- Use the three-day food diary in stages of change.

Starting the Conversation

1. How many times a week did you feel very hungry? 1 Very few times 2 Once a week 3 Twice a week 4 More than twice a week
2. How many times a week did you eat breakfast, lunch, and dinner? 1 Every day 2 Fewer than 3 days 3 3 or more days
3. How many calories do you eat per day? 1 Under 1200 2 1200-1500 3 1500-1700 4 More than 1700
4. How many times a week do you eat fast food? 1 Everyday 2 1-2 times a week 3 3-4 times a week 4 Rarely
5. How much exercise do you get per week? 1 None 2 Less than 1 hour 3 1-2 hours 4 More than 2 hours

Functional Nutrition 101 - When to Refer

- Monitor and refer to:
  - Cholesterol levels (lipoprotein)
  - Blood pressure
  - Blood glucose
  - Body mass index (BMI)
  - Exercise levels
  - Emotional well-being
  - Social support

- Refer to professionals when:
  - Blood pressure is elevated
  - Blood glucose is abnormal
  - Cholesterol levels are high
  - Exercise levels are low
  - Emotional well-being is impaired
  - Social support is lacking

- Consult with a dietitian or nutritionist for personalized advice.

- Use the three-day food diary in stages of change.


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Epworth Sleepiness Scale

<table>
<thead>
<tr>
<th>Sleepiness Level</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Severe sleepiness</td>
<td>10</td>
</tr>
<tr>
<td>Very severe sleepiness</td>
<td>15</td>
</tr>
<tr>
<td>Severe sleepiness</td>
<td>8</td>
</tr>
<tr>
<td>Very severe sleepiness</td>
<td>30</td>
</tr>
</tbody>
</table>

1. How often do you feel drowsy on your commute to work
2. How often do you feel drowsy in class
3. How often do you feel drowsy during meetings or lectures
4. How often do you feel drowsy during driving
5. How often do you feel drowsy during daily activities
6. How often do you feel drowsy during leisure activities
7. How often do you feel drowsy during work
8. How often do you feel drowsy during sleep

**Epworth Sleepiness Scale**

1. How often do you feel drowsy on your commute to work
   - Never
   - Rarely
   - Sometimes
   - Often
   - Usually
   - Always
2. How often do you feel drowsy in class
   - Never
   - Rarely
   - Sometimes
   - Often
   - Usually
   - Always
3. How often do you feel drowsy during meetings or lectures
   - Never
   - Rarely
   - Sometimes
   - Often
   - Usually
   - Always
4. How often do you feel drowsy during driving
   - Never
   - Rarely
   - Sometimes
   - Often
   - Usually
   - Always
5. How often do you feel drowsy during daily activities
   - Never
   - Rarely
   - Sometimes
   - Often
   - Usually
   - Always
6. How often do you feel drowsy during leisure activities
   - Never
   - Rarely
   - Sometimes
   - Often
   - Usually
   - Always
7. How often do you feel drowsy during work
   - Never
   - Rarely
   - Sometimes
   - Often
   - Usually
   - Always
8. How often do you feel drowsy during sleep
   - Never
   - Rarely
   - Sometimes
   - Often
   - Usually
   - Always

**Stress Management**

- Vagal atternts & epigenetics
- Modulator of the Brain-Gut Axis in Psychiatric and Inflammatory Disorders

- Mindfulness, meditation, music vs. breathwork & sound
- Self efficacy & locus of control

**Social Support**

- Accountability, community, solitude/rest, mental health

**Decrease**

- Rumination & perseveration
- Self-blame, attributions, catastrophic thinking
- Negative affect and anxiety
- Use of alcohol

**Increase**

- Patience, empathy & perspective
- Problem-oriented solutions
- Rational problem-solving
- Mindfulness techniques
- Exercise

**Meditation Science**
ROLE OF THE PHYSICAL THERAPIST IN LIFESTYLE MEDICINE ADVOCACY

- Physical Therapist Practitioners
- Physical Therapy Educators
- Physical Therapist Researchers

PHYSICAL THERAPIST PRACTITIONERS

- Engage in health promotion activities, like promoting programs like "Move Your Body" or "Better Balance"
- Include physical activity assessments in programs
- Collaborate with dietitians, pharmacists, and other health care providers
- Serve as a key leader in community programs
- Engage in prevention initiatives

PHYSICAL THERAPIST EDUCATORS

- Include health behaviors and physical activity in the curriculum of programs
- Include nutrition
- Integrate health with stress and illness
- Utilize community resources
- Engage in the development of research projects
- Promote the importance of health behavior change congruent with the physical therapy curriculum
- Assign specific research and educational objectives in the classroom

PHYSICAL THERAPIST RESEARCHERS

- Show how physical therapy interventions influence health behavior
- Demonstrate healthy living and how physical therapy can improve
- Engage in research on lifestyle interventions with a variety of research methodologies
- Collaborate on research with other health care providers
- Promote health and well-being through prevention and treatment of various conditions

CASE STUDY

BIO
- Physical
- Energetic
- Intellectual

PSYCHO-SOCIAL
- Psychoemotional
- Spiritual
- Intellectual

MEDICAL THERAPEUTIC YOGA
GOALS FOR LIFESTYLE MEDICINE IN PT

- Improved quality of life
- Tackle chronic disease & injury
- Improved outcomes in tough or simple cases
- Move away from episodic care
- Move away from repeated care for same issues
- Decrease chronic disease risk
- Empower patients by increasing health literacy, locus of control and self-efficacy
- Decrease practitioner burnout

Selected Sources
1. www.gingergarner.com

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Thank you!