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**Medical Home Series Two
Part IV A Metaphor for Medical Practice
The Foundation is Health and Wellness
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Whether you call it a “health home” or a “medical home,” the name is a metaphor for the design and content of primary healthcare in the twenty-first century. Being a metaphor, the name implies a resemblance between the structure and function of a “home” and the organization and activities of a “medical practice” organized around the concept of “home.”

By its nature a home is a place where the members of a family live and where they nurture one another. A home is a place where food and activities -- physical, intellectual, spiritual -- are designed to promote health and wellness. In this way, a home is a precise metaphor for excellent healthcare as the primary intent of the “medical home” is not to treat disease but to promote health and to model and to encourage wellness. While, like the “home,” where those who become ill are cared for, the primary design, object and focus of the “medical home” is the promotion of health and of wellness. So the “medical home,” while being excellent in the care of those who have become ill, never loses its focus on wellness.

SETMA’s first series of articles on Medical Home (published in the *Your Life Your Health* between February and May, 2009), included the following February 26, 2009 attempt to describe the “medical home” metaphor. That article stated that the “medical home” is a place:

- “...where you need fear no harm from those who are with you.
- “... where your needs are met.
- “...where you can go when you don’t know what else to do.
- “...where you can be yourself and you can tell others how you really feel without fear of rejection.
- “...where others really want to see you succeed.
- “...where if you are away too long, someone is calling to find out if you are OK.
- “...where you are being treating like family.”

That article further stated, “The Medical Home requires that patients become people to the healthcare provider and that those people have personal value beyond their financial contribution to the practice’s success...it is possible to have implemented all of the elements of Medical Home excellently without having become a Medical Home. Medical Home must have a foundation of excellence in the science of medicine but that excellence must be received in a personal setting.”

Health and Wellness

Healthcare very often focuses upon what has been lost – health and wellness – because that loss is what motivates patients to seek care. Although the most common search on the World Wide Web is for health information and often for keys to staying healthy, I have never had a patient make an appointment to ask, “How can I stay healthy?” We often over look the fact that many of our efforts to promote health and wellness are actually examples of how much “natural” supports of health and wellness have been lost. The perfect example is “wellness centers” or exercise “studios.” These ubiquitous centers are a testament to how unhealthy our lifestyles have become. We have treadmills to substitute for our lack of walking in our daily life. We have spent several generations creating means of making physical activity unnecessary – first bicycles and then automobiles, now human conveyor belts at airports or escalators at the mall and now we spend billions of dollars compensating for the unhealthy effects of these technological advances. All of these “conveniences” contribute to our sedentary life style and thus to our loss of health and wellness.

Lifestyle Wellness

Wellness can be and should be promoted without gymnasiums and treadmills. In a 2004, study of the Amish, we were reminded of the value of “activities of daily living.” The Amish reject modern conveniences. They don’t use telephones or computers and they don’t use automobiles; they walk. And, how they walk! If they want to talk to a neighbor, they walk over to the neighbor’s house. They don’t “go to the track, or to the gym.” They don’t log their miles, or pace. They don’t use heart rate monitors. They don’t exercise as a discipline. They exercise as an “activity of daily living.”

The study of Amish men and women was published January, 2004 in *Medicine and Science and Exercise*. The result of a project at the University of Tennessee, the study documented that Amish men are six times more active than the average American. While the average American takes 2-3,000 steps a day; Amish men take an average of 18,425 steps a day and Amish women take an average of 14,196 steps a day. One Amish man took over 51,000 steps in a day, which is equivalent to walking 25 miles.

Purposeful Activity

The study documented that in a week Amish men perform:

- 10 hours of vigorous physical activity (tossing bales of hay, shoveling, digging and plowing)
- 43 hours of moderate activity (gardening, feeding animals)
- 12 hours of walking

Amish women weekly perform:

- 3.5 hours of vigorous physical activity
- 39 hours of moderate activity
- 6 hours of walking

What is the result? The Amish have a 4% incidence of obesity and 26% were overweight as opposed to a 31% obesity and 64% overweight in the general American population. And, this is in spite of the very high-calorie, high-fat-content diet which the Amish typically consume.

The Amish finding falls in line with a theory espoused by University of Wisconsin professor William Morgan who stresses the need for “purposeful activity” in exercise. Mr. Morgan calls for a paradigm shift in physical activity, criticizing the current trend of “peddling treadmills to nowhere.” He says that when people exercise for a purpose, there is higher adherence to an exercise program. Purposeful activity includes mowing the lawn, cleaning the house, or even walking the dog. The Amish have that skill down pat. “The cows have to be milked,” says Mr. Morgan. “You can’t say, ‘It’s rainy. I’m going to skip today.’”

Activities of Daily Living and Exercise

Can something as simple as walking further to get the mail or the newspaper make a difference in your health? Absolutely! In another study, published in the May, 2004 issue of *Medicine & Science and Exercise*, the official journal of the American College of Sports Medicine, it was reported that middle-aged women who took at least 10,000 steps per day on average were much more likely to fall into recommended ranges for measures of body composition such as total body weight and body fat percentage. Conversely, inactive women – those taking fewer than 6,000 steps per day – were more likely to be overweight or obese and have higher waist circumferences, a strong predictor of increased risk of cardiovascular disease.

Treatment of every disease known to man

The treatment for virtually every illness known to man, including diabetes, heart disease, respiratory disease, congestive heart failure, cholesterol, etc., begins with activity. And, not only are these conditions effectively treated by activity, but **they are also effectively prevented by activity**. The reality is that the causes of all of these diseases can be traced directly or indirectly to sedentary life styles.

In the November, 2005 issue of *Journal of Applied Physiology*, a review article was published entitled, *Effects of exercise and diet on chronic disease*. The following is a summary:

- Modern chronic diseases, including cardiovascular diseases, Type 2 diabetes, metabolic syndrome, and cancer, are the leading killers in Westernized society and are increasing rampantly in developing nations.
- Obesity, diabetes, and hypertension are now even commonplace in children.
- Overwhelming evidence from a variety of sources, including epidemiological,

prospective cohort, and intervention studies, links most chronic diseases seen in the world today to physical inactivity and inappropriate diet consumption.

- Modifying the lifestyle of children is paramount to reducing chronic disease risk.
- The evidence is overwhelming that physical activity and diet can reduce the risk of developing numerous chronic diseases, including CAD, hypertension, diabetes, metabolic syndrome, and several forms of cancer and in many cases in fact reverse existing disease.

(For more information, see the seven-part series entitled “*Chronic Disease: The Effects of Exercise and Diet*,” at www.jameslhollymd.com, *Your Life Your Health* under the icon “*Exercise*.”

In a column entitled “The Consequences of being a couch potato,” (February 26, 2004, *Your Life Your Health*). Three questions were asked and answered:

- **Question:** Which will do more for the improvement of your health? Visiting the doctor or visiting the gym?
- **Question:** Which will do more for the improvement of your health? Taking a pill or taking a walk?
- **Question:** What can medicines do to help you avoid the consequences of your inactive lifestyle? **Nothing!**

Aerobic Activity – How Much Is Enough?

Placing exercise at the core of a health and wellness program is appropriate. In 2007, the American College of Sports Medicine and the Centers for Disease Control and Prevention updated the 1995-published national guidelines on Physical Activity and Public Health. The update stated that to promote and maintain health, all healthy adults aged 18-65 years need moderate-intensity aerobic physical activity for a minimum of 30 min on five days each week or vigorous-intensity aerobic activity for a minimum of 20 min on three days each week. Also, combinations of moderately and vigorous-intensity activity can be performed to meet this recommendation. (For more information, see the series entitled “*Physical Activity and Public Health: 2007 Updated Recommendation for Adults*,” at www.jameslhollymd.com, *Your Life Your Health*)

Muscle-Strengthening Activity

To promote and maintain good health and physical independence, adults will benefit from performing activities that maintain or increase muscular strength and endurance for a minimum of two days each week. It is recommended that 8-10 exercises be performed on two or more nonconsecutive days each week using the major muscle groups. To maximize strength development, a resistance (weight) should be used that allows 8-12 repetitions of each exercise resulting in volitional fatigue. Muscle-strengthening activities include a progressive weight-training program, weight bearing calisthenics, stair climbing, and similar resistance exercises that use the major muscle groups.

Clarifications to the 1995 Recommendation

Although fundamentally unchanged from the 1995 recommendation, the updated recommendation is improved in several ways. First, the recommended frequency for moderate- intensity physical activity has been clarified. The 1995 document simply specified "most, preferably all days per week" as the recommended frequency while the new recommendation identifies five days per week as the recommended minimum.

The updated recommendation now clearly states that the recommended amount of aerobic activity (whether of moderate- or vigorous-intensity) is in addition to routine activities of daily living which are of light intensity, such as self care, casual walking or grocery shopping, or less than 10 min of duration such as walking to the parking lot or taking out the trash. Few activities in contemporary life are conducted routinely at a moderate intensity for at least 10 min in duration. However, moderate- or vigorous-intensity activities performed as a part of daily life (e.g., brisk walking to work, gardening with shovel, carpentry) performed in bouts of 10 min or more can be counted towards the recommendation. Although implied, this concept was not effectively communicated in the original recommendation.

SETMA's Medical Home, Which Is Your Medical Home and Wellness

SETMA's Medical Home actively promotes health and wellness. While recognizing that it is the patient's responsibility to "get started," SETMA's Medical Home helps you maintain your health in the following ways::

1. **The LESS Initiative** – The acronym stands for "lose weight," "exercise" and "stop smoking." These lifestyle changes are valid for healthy people and unhealthy people. With a personalized weight management assessment, a personalized exercise prescription and an assessment of smoking status, SETMA's LESS Initiative is the starting point of our wellness program. Remember, the Agency for Healthcare Research and Quality (AHRQ) has accepted SETMA's LESS Initiative as a valuable and creative healthcare innovation, making it available to all physicians in America.
2. **Preventive and Screening** – Provider compliance with standards of preventive care and of screening for illnesses supports our patients' determination to be healthy. It encourages healthy living and discovers illness or the potential for illness while health and wellness can still be recovered.
3. **Wellness Assessment** – This peer reviewed and evidence-based assessment allows patients to see the relationship between rest, eating habits, etc., and wellness. And, it recommends to the members of our Medical Home lifestyle changes which can support wellness and health.
4. **Stress Assessment** – Stress relief is more than a pill. To determine the sources of stress and to recommend a solution is a key part of SETMA's wellness program.
5. **Diabetes Prevention** – The best way to treat diabetes is "don't get it." Screening at-risk or high-risk patients for diabetes allows early intervention to delay the onset of diabetes and hopefully to prevent its onset completely.
6. **Hypertension Prevention** – Without preventive, lifestyle steps being taken, 90% of 55 year-olds without hypertension will develop high blood pressure in their lifetime.

Evidenced-based medicine gives guidance for blood pressure wellness and the prevention of disease. SETMA's Medical Home identifies those life style changes and promotes patient adherence with the same.

Nothing New

In addition to exercise and activity, there are other elements to a Medical Home health and wellness program. But, without an exercise, and an activity program, all of the other elements are relatively of little benefit. Working with diabetes, thirty years before insulin was discovered, and recommending a plan of care and treatment plan for patients with diabetes which emphasized exercise 100 years before his ideas were confirmed by random controlled studies, Dr. Elliot Joslin said, "It is better to discuss how far you have walked than how little you have eaten." Dr. Joslin's recognition of the value of exercise in health and wellness was not isolated. SETMA's exercise prescription includes the following quote, ""Those who think they have not time for bodily exercise will sooner or later have to find time for illness." (Edward Stanley, Earl of Derby; *Conduct of Life*, address to Liverpool College, 20 December, 1873).

The Medical Home reality is that you can be healthy and well, but you will have to walk, jog, run, bike, swim.....