

Help Your Patients by Helping Yourself

Mark Sanna, DC, ACRB Level II, FICC

As healthcare providers, we are expected to model the behaviors we promote. Doctors who do not engage in healthy behaviors are less likely to counsel patients regarding their importance--and their patients are less likely to take the message seriously.

According to the American College of Sports Medicine, when doctors have adequate knowledge about the health benefits and counseling aspects of physical activity, they have higher levels of physical activity themselves and are more likely to include physical activity recommendations in their practice. While the majority of chiropractors report frequently discussing nutrition and diet, physical fitness, changing unhealthy behaviors, and disease prevention with their patients--do we listen to our own advice? You may find the results of a recent survey surprising.¹

NonSmokers But Overweight

Decade after decade, tobacco use has topped the list as the number one cause of death in our nation. Smoking-related deaths total 440,000 each year. On an optimistic note, ninety five percent of the chiropractors surveyed say they are non-smokers. This is positive compared with the approximately twenty percent of the U.S. population that smokes. It is also evidence that chiropractors have been on the forefront of aligning with the message about the dangers of smoking.

That's the good news.

But, while chiropractors have embraced the public health initiative against smoking, we have been slower to take up the cause of obesity. And obesity, resulting from a lack of exercise and poor dietary choices, is about to overtake tobacco as the number one killer of Americans.

Objective measurement is the gold standard of an outcome-based health care paradigm. Objective documentation must also become our standard for prevention and wellness services. The objective measurement that is the most widely accepted and referenced to determine a person's state of "wellness" is Body Mass Index (BMI). BMI is a ratio between weight and height: $BMI = \text{Weight [in pounds]} \times 703 / (\text{Height [in inches]}^2)$. Research shows that an individual with a BMI of 25 - 29.9 is considered overweight. Approximately sixty six percent of Americans fall into this category.

According to the survey, Body Mass Index calculations showed that only twenty five percent of chiropractors have normal weight, with sixty eight percent being overweight, and twenty seven percent obese. We need to try harder to become the picture of health for both ourselves and our patients. If we want to have a positive influence on our community, we need to set the standard for wellness and prevention, and live the advice we give our patients.

If your BMI is high, you have an increased risk of developing many chronic diseases including hypertension, cardiovascular disease, dyslipidemia, adult-onset diabetes and osteoarthritis, to mention but a few. In order to position ourselves as the providers of preventative care for the significant causes of death and disease described above, we should include BMI measurement as

part of every chiropractic evaluation. Make the measurement of BMI on every patient's first visit standard procedure in your practice. If you are considering adopting an Electronic Health Record (EHR) for your practice, recording BMI is a mandatory component necessary to achieve "meaningful use" of your EHR and to qualify for the federal government's \$44,000 incentive for conversion.

But how willing are you to check your patients' BMI when you are yourself overweight? And don't think you're patients won't notice. They will.

Getting It Under Control

The American Heart Association recommends thirty minutes of moderate intensity cardiovascular activity on a daily basis. However, twelve percent of chiropractors report no cardiovascular activity at all and almost half engage in cardiovascular exercise only one to two days a week. In the area of exercise, we need to raise our game.

Poor dietary habits are the second component behind the rise of obesity. How healthy are chiropractors' nutritional habits? The majority of chiropractors report regularly taking vitamins or supplements. However, almost two-thirds consume two servings or less of whole grains a day, despite the fact that the consumption of whole grains is associated with lower rates of premature mortality. Instead of the recommended five to nine daily servings of fruits and vegetables, more than half of chiropractors report consuming only four servings or less.

[pb]You can increase your intake of fruit by simply bringing an apple or orange to the office for a mid-morning and mid-afternoon snack. While you're at it, why not make a bowl of fresh fruit available to your patients in your reception room? Your patients will appreciate the gesture and the subliminal message provided by the healthy fruit won't be missed. The Centers for Disease Control and the Produce for Better Health Foundation have launched a new public health initiative called Fruits & Veggies-More Matters™. Visit the FruitsandVeggiesMatter.gov Web site to get tools and information to help you and your patients eat more fruits and vegetables each day.

Prevention & Wellness

We have entered the era of health care reform. Legislators and lobbyists are focusing on "prevention and wellness" as methods of decreasing out-of-control healthcare costs. Officials have very clearly voiced their opinion, that in order to control the major costs generated from managing chronic diseases, we must focus our resources on programs and providers that efficiently deliver prevention and wellness services.

Most chiropractors advocate the benefits of chiropractic care for the maintenance of health and wellness and report receiving regular chiropractic care themselves. On the other hand, they do not make as effective use of other preventive services. More than half reported never receiving cancer screenings; twenty five percent don't have regular eye exams, and less than a quarter visit the dentist every two years or less. And there is that weight issue as well.

If you talk to your patients about the importance of preventive maintenance for their spine, joints and overall health, you should recommend that they visit their dentist, optometrist, and other health care professionals as well. All good advice. But are you following it yourself?

Practice What You Preach

A great way to communicate the facets of wellness with your patients is to share the following analogy with them. Teach patients to think of their health using the analogy of a three legged stool.

The first leg of the stool represents chiropractic care, which maximizes the potential of the neuromusculoskeletal system. The second leg of the stool is the active care exercises that empower the patient and decrease their reliance upon passive care. The third leg of the stool is behavioral modification through developing healthy habits. Weaken one leg and the stool teeters. Remove a leg and it comes crashing down!

Yet analogies like this, while very useful, lack credibility if the person stating them isn't following his or her own advice.

We cannot call ourselves practitioners of prevention and wellness without addressing the single greatest measurable and controllable contributor to death and disease - poor diet and unhealthy lifestyle choices. We can become the true "Whole Person Practitioners" that we have the potential to be. The chiropractic profession can no longer solely focus on the musculoskeletal aspect of care. This places our profession firmly in the grip of third party payors and in the vice of ever-decreasing insurance reimbursement.

Embracing Whole Person Care, including all three legs of Chiropractic, Active Care, and Behavioral Modification, will give your practice a solid foundation to withstand the winds of the healthcare reform storm.

Chiropractors can have the same health statistics as the rest of the nation, or, through choosing healthy behaviors--including regular chiropractic care--we can do better. Shift your paradigm and you stand to make a significant impact not only on your own health, but on the health of your patients and our nation.

Reference

1. Model Behavior, Nataliya Schetchikova, PhD, ACA News, December 2008.