

# Lifestyle Medicine

There is now an epidemiologic shift in the burden of illness from infectious diseases in the last century to lifestyle diseases in the current. Mortality due to lifestyle diseases like diabetes, hypertension and heart disease is now ranked higher than infections. The medical community is now realizing the importance of lifestyle intervention to address the problem. We hope that this issue of our journal focused on lifestyle medicine will help inform our colleagues in family and community practice the necessity and available strategy of lifestyle intervention.

Lifestyle Medicine is the use of evidence-based lifestyle therapeutic approaches, including a whole food, plant-based eating pattern, regular physical activity, restorative sleep, stress management, the avoidance of risky substances, and positive social connection as a primary modality delivered by trained and certified clinicians, to prevent, treat, and often reverse chronic disease.<sup>1</sup> It is distinct from other disciplines, such as functional, integrative, complementary, and alternative medicine. Lifestyle medicine focuses on conditions that consume 80% of healthcare visits, hospitalizations, and costs. Hence, it is recommended as the first line and the foundational intervention for non-communicable diseases that address the modifiable lifestyle and behavioral risk factors impacting the disease trajectory, quality of life, and overall health outcomes.<sup>2</sup>

Despite the advances and increasing availability of medical care, these chronic lifestyle-borne diseases continued to increase exponentially, causing 74% of all deaths globally.<sup>2</sup> However, healthcare providers do not receive adequate education, foundational skills, and personal experiential references to efficiently prescribe the recommended lifestyle therapy in primary and specialty care. Thus, lifestyle medicine initiatives align with the quadruple healthcare aims to deliver better patient experience, better outcomes, lower costs, and better clinician satisfaction.<sup>3</sup> Through the lifestyle medicine lens and the empowerment of patients, healthcare providers often bring whole health management and disease remission into the scope of care at a lower cost.

Lifestyle is an individual's choice. The study by Longakit reveals an individual choice of lifestyle practice for wellness elements like physical, social and emotional state. While the study of Alimorong is an individual's choice when he or she has health risk like hypertension. Physicians should be able to influence this patient's choice and there are several strategies available. The case studies of Solijon, Acero and Tan are different strategic methods to promote lifestyle change. The interventions given are usually structured and conducted face-to-face. On the other hand, the studies of Cristobal and Ngo uses digital health interventions to promote lifestyle change.

While the studies on lifestyle interventions presented in this issue are not robust evidence like randomized trials, these are experiences by local physicians with their patients. These experience may be a good enough basis to increase awareness and provide training for family and community physicians on lifestyle medicine, as advocated by the study of Palma.

**Noel L. Espallardo, MD, MSc, FPAFP**  
**Nicolas R. Gordo, Jr., MD, MHA, CFP**  
**Mechelle Acero Palma, MD, CFP**

## References

1. American College of Lifestyle Medicine. Lifestyle Medicine. [Lifestylemedicine.org](https://lifestylemedicine.org). Accessed May 27, 2023.
2. World Economic Forum. Global Risks 2010 A Global Risk Network Report. [Weforum.org](https://www.weforum.org/reports/global-risks-2010). Published January 14, 2010. Accessed October 26, 2021.
3. Rea B, Worthman S, Shetty P, Alexander M & Triik JL. Medical education transformation: Lifestyle medicine in undergraduate and graduate medical education, fellowship, and continuing medical education. *Am J Lifestyle Med* 2021; 15(5): 514–25. <https://doi.org/10.1177/15598276211006629>