

# Lifestyle Medicine and Otolaryngology: **Embracing the Future**

OTO Open 2021, Vol. 5(4) I-3 © The Authors 2021 Article reuse guidelines: sagepub.com/journals-permissions DOI: 10.1177/2473974X211059091 http://oto-open.org



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#### **Abstract**

Lifestyle medicine is a relatively new specialty that focuses on behavior change to prevent, treat, and reverse chronic disease and promote wellness. It is relevant to any medical or surgical field that deals with noninfectious chronic disease and to any individual or community pursuing health and wellness. Lifestyle medicine offers evidence-based interventions and tools to foster wellness and resiliency in ourselves and our patients. This commentary gives a brief background of lifestyle medicine and how embracing the discipline could benefit the American Academy of Otolaryngology-Head and Neck Surgery and the field of otolaryngology overall. Specifically, we describe opportunities to improve patient health, promote personal wellness, combat burnout, and foster unity among otolaryngology subspeciality societies.

#### **Keywords**

lifestyle medicine, burnout, wellness, resiliency, longevity

Received October 16, 2021; accepted October 18, 2021.

## **Commentary**

#### Health, Wellness, and Lifestyle in Otolaryngology

The strategic plan for the American Academy of Otolaryngology-Head and Neck Surgery (AAO-HNS) includes "wellness and resiliency" as 1 of 6 goals and objectives over a 3- to 5-year horizon. Although not defined explicitly in the plan, wellness and resiliency have traditionally focused on avoiding burnout, which has a mean prevalence of 35% among otolaryngologists and reaches 50% in some departments. Wellness, however, is optimally viewed in the broader context of actively pursuing activities, choices, and lifestyles that lead to a state of holistic health. Unlike health, wellness is not static but rather an active pursuit, based on individual lifestyle behaviors and choices. These behaviors not only mitigate burnout but can promote healthy longevity through lifestyle medicine, which focuses on the therapeutic value of personal lifestyle and behavior choices.

Lifestyle medicine uses 6 evidence-based interventions (Figure 1) to prevent, treat, and reverse noninfectious chronic diseases.<sup>4</sup> Whereas stress reduction is often the focus

for preventing burnout, a global focus on all 6 lifestyle interventions is more consistent with the holistic concept of wellness and resiliency. Beyond burnout, unhealthy lifestyle behaviors can promote chronic disease through epigenetic changes, microbiome alterations, and cellular stress or injury, leading to inflammation and a positive feedback loop.<sup>5</sup> Lifestyle interventions can treat many noninfectious chronic conditions (ie, obesity, hypertension, cardiovascular disease)<sup>6</sup> and prevent or reverse certain chronic diseases (ie, type 2 diabetes) by tackling causes and breaking the negative feedback

The American College of Lifestyle Medicine (ACLM) was founded in 2004 with a vision that health care would shift from sick care (ie, procedures and medications) to lifestyle changes aimed at causes. Looking beyond disease prevention, the ACLM views lifestyle behaviors as medical interventions, or therapies, to be promoted, implemented, and sustained. Lifestyle medicine not only has the potential to play a significant role in combating the chronic disease epidemic but also in preventing and mitigating physician burnout<sup>8</sup> and promoting wellness and resiliency.

## Physician Resiliency and Wellness

Dan Buettner, a National Geographic author, coined the term Blue Zones to describe several areas of the world with a disproportionate number of centenarians and a lower prevalence of chronic disease. With a team of scientists, anthropologists, epidemiologists, and demographers, he studied these populations vigorously and wrote about their common overlaps in lifestyle, creating a list of 9 common behaviors: regular physical activity, a clear purpose in life, stress management, moderate caloric intake, plant-predominant diet, moderate alcohol intake, spiritual/religious engagement, family life, and social interaction. These 9 behaviors overlap closely with the 6 lifestyle medicine domains defined by the ACLM (**Figure 1**).

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# LIFESTYLE MEDICINE

# 6 WAYS TO TAKE CONTROL OF YOUR HEALTH

Lifestyle Medicine is an evidence-based approach to treating and reversing disease by replacing unhealthy behaviors with positive ones.

www.lifestylemedicine.org

#### NUTRITION

Food is Medicine. Choose predominantly whole, plant-based foods that are rich in fiber and nutrient dense. Vegetables, fruit, beans, lentils, whole grains, nuts and seeds.

#### EXERCISE

Regular and consistent physical activity that can be maintained on a daily basis throughout life walking, gardening, push ups and lunges - is an essential piece of the optimal health equation.

#### STRES

Stress can lead to improved health and productivity
- or it can lead to anxiety, depression, obesity,
immune dysfunction and more. Helping patients
recognize negative stress responses, identify coping
mechanisms and reduction techniques leads to
improved wellbeing.

#### SUBSTANCE ABUSE

The well-documented dangers of any addictive substance use can increase risk for many cancers and heart disease. Positive behaviors that improve health include cessation of tobacco use and limiting the intake of alcohol.

#### SLEE

Lack of, or poor quality sleep can lead to a strained immune system. Identify dietary, environmental, and coping behaviors to improve sleep health.

#### RELATIONSHIPS

Social connectedness is essential to emotional resiliency. Studies show that isolation is associated with increased mortality. Considering a patients home and community environment improves overall health.





Figure 1. Pillars of lifestyle medicine: 6 pillars that underly healthy lifestyle behaviors. With permission, American College of Lifestyle Medicine.

Understanding and applying the principles of lifestyle medicine can benefit otolaryngologists by promoting healthy longevity while minimizing noninfectious chronic diseases, including burnout. Burnout does not have a simple solution but optimally requires individual approaches and external or systematic changes<sup>10</sup> that are facilitated through lifestyle medicine. For example, incorporating principles of lifestyle

medicine into training programs could support residents' abilities to initiate and sustain healthy lifestyle choices that include healthy eating, restful sleep, stress reduction, and positive social relationships. The same could be argued for the head of a department or another body of power that has autonomy to effect external or systematic change within or across institutions.

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## Patient Empowerment and Improved Patient Outcomes

Lifestyle interventions are tools that otolaryngologists can use to improve patient outcomes and empower patients to increase personal responsibility for their care. Raising awareness of how lifestyle behaviors, which have the potential to be altered by the patients, can affect their illness, treatment, and recovery can inspire hope, optimism, and greater participation in shared decisions. Changing ingrained habits, however, is not easy or intuitive, so a key aspect of lifestyle medicine deals with strategies and models to understand and promote positive, sustained behavior change.

Many chronic illnesses, as well as smoking and alcohol use, play important roles in wound healing, postoperative recovery, and eligibility for elective surgery. Principles from lifestyle medicine could help patients reduce surgical risk caused by obesity, hypertension, smoking, alcohol use, chronic stress, and suboptimal nutrition. There is also an immense opportunity for research on how lifestyle therapeutic interventions can affect otolaryngologic-specific diseases, including respiratory infections, head and neck cancer, immune disorders, and sleep disturbance. For example, research linking the microbiome and obstructive sleep apnea suggests possibilities of treating it by altering the microbiota through dietary intervention.<sup>11</sup>

# Increased Interaction and Engagement Across Otolaryngology Subspecialties

Lifestyle medicine is relevant across all otolaryngology subspecialties and therefore has the potential to increase specialty unity, like other AAO-HNS efforts that transcend subspecialties, which include the Guidelines Task Force, the Combined Otolaryngology Research Effort, the Section for Women, the Section for Young Physicians, and the Section for Residents and Fellows-in-Training. The transcendent importance of lifestyle medicine to all otolaryngologists, regardless of subspecialty or society affiliation, is a perfect opportunity to synergize, collaborate, and promote specialty unity. This could extend beyond otolaryngology to the general medical community, including primary care and nonsurgical disciplines.

One suggestion to promote lifestyle medicine within otolaryngology would be to create a Lifestyle Medicine Task Force to expand beyond the current AAO-HNS Wellness Team, with membership representing otolaryngology sister societies and subspecialty organizations. The charge could include maintaining and disseminating relevant and timely lifestyle medicine literature and guidelines and devising strategies to implement findings into clinical practice, personal wellness, residency training, and community events. Embracing lifestyle medicine as an essential component of otolaryngology training and practice has the potential to improve our field and influence the transformation of health care in the United States.

#### **Author Contributions**

Hailey M. Juszczak, conception, research, manuscript preparation; Richard M. Rosenfeld, conception, research, manuscript preparation

#### **Disclosures**

Competing interests: None.

Sponsorships: None.

Funding source: None.

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