

Lifestyle Medicine

The Common Sense Solution To The Chronic Disease Epidemic

Saray Stancic, MD

Plant-Based Health & Wellness Summit

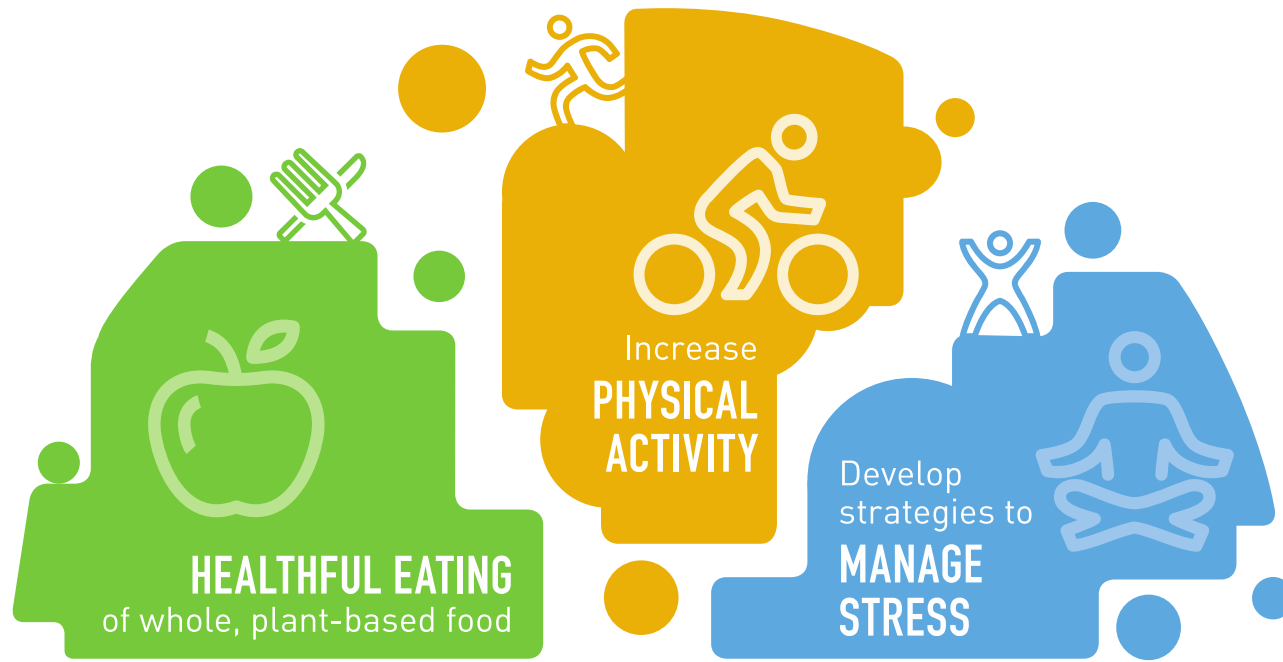
August 11, 2019

Denver, Colorado

HELLO

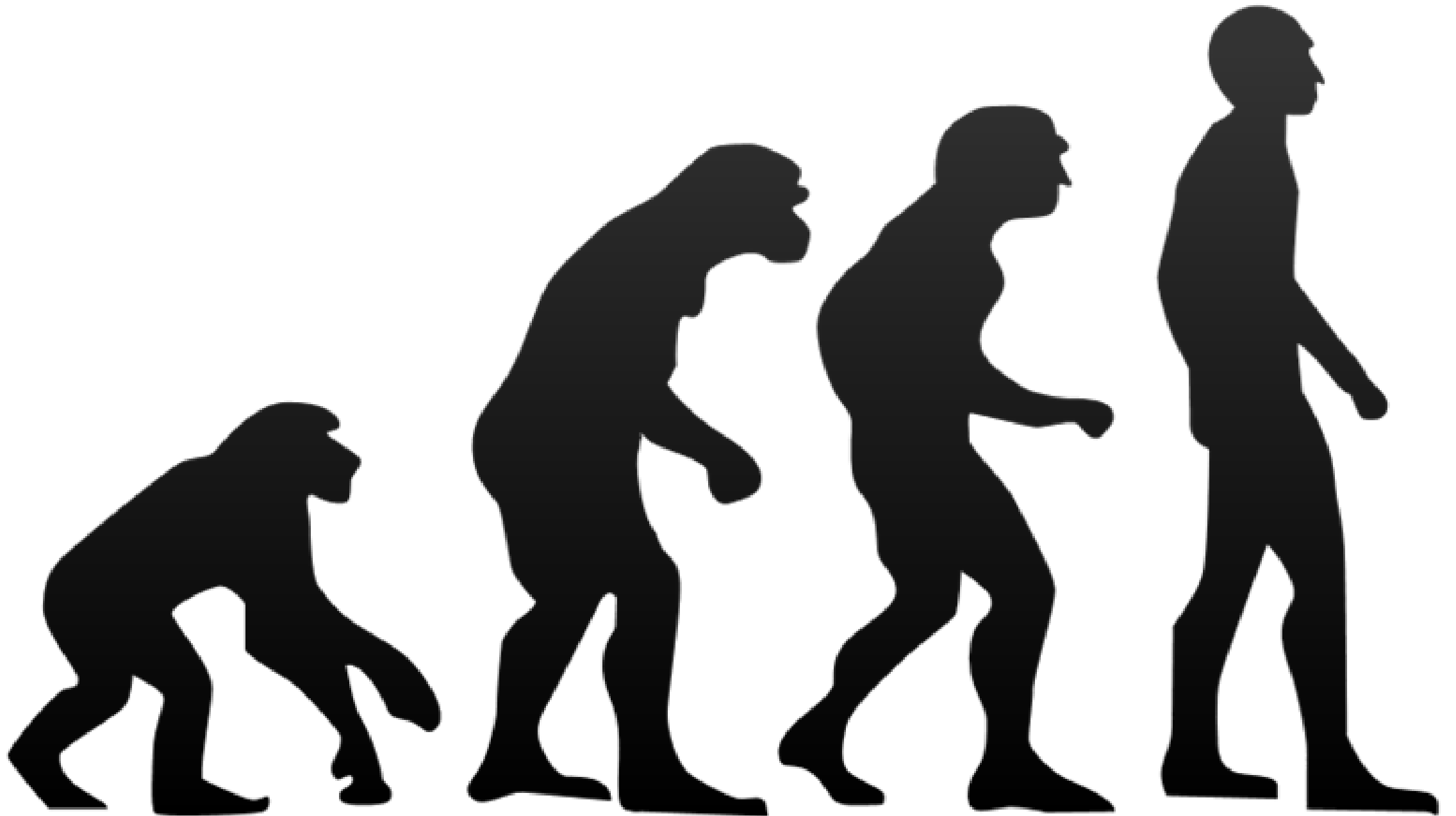
my name is

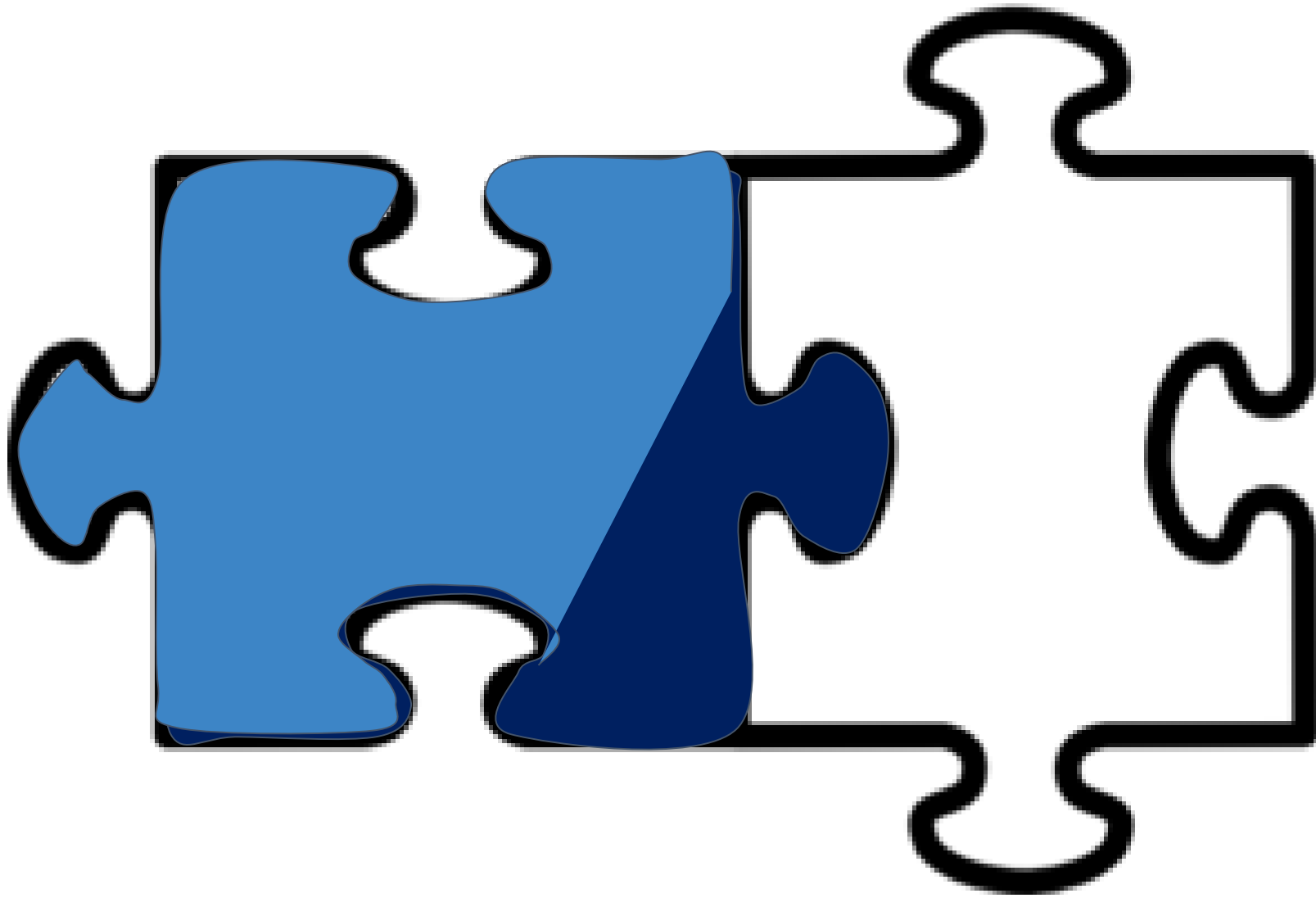




LIFESTYLE MEDICINE FOCUSES ON 6 AREAS TO IMPROVE HEALTH

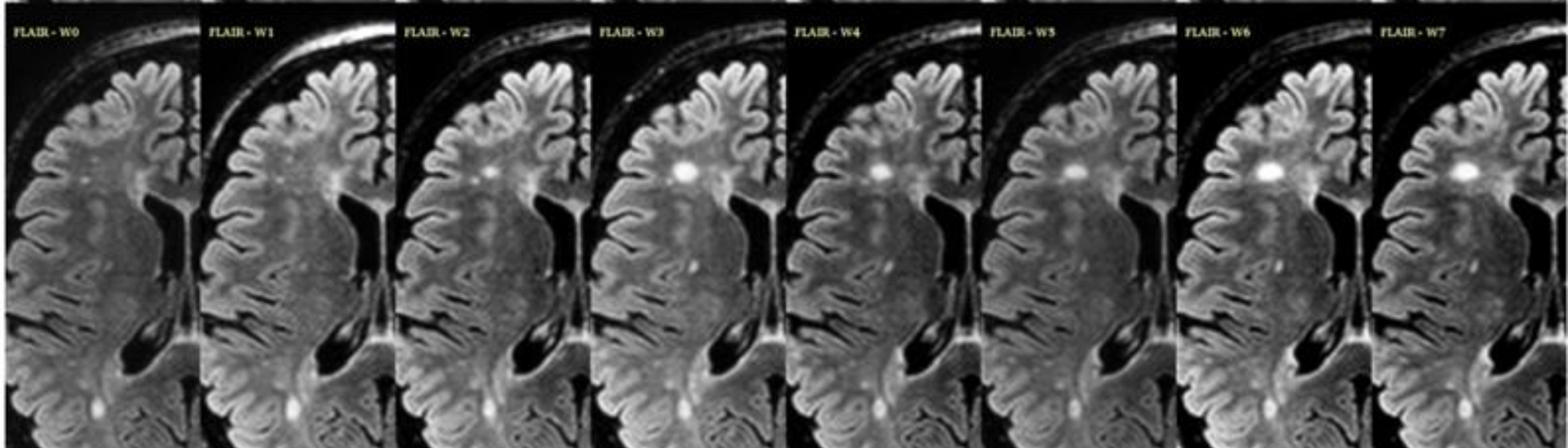
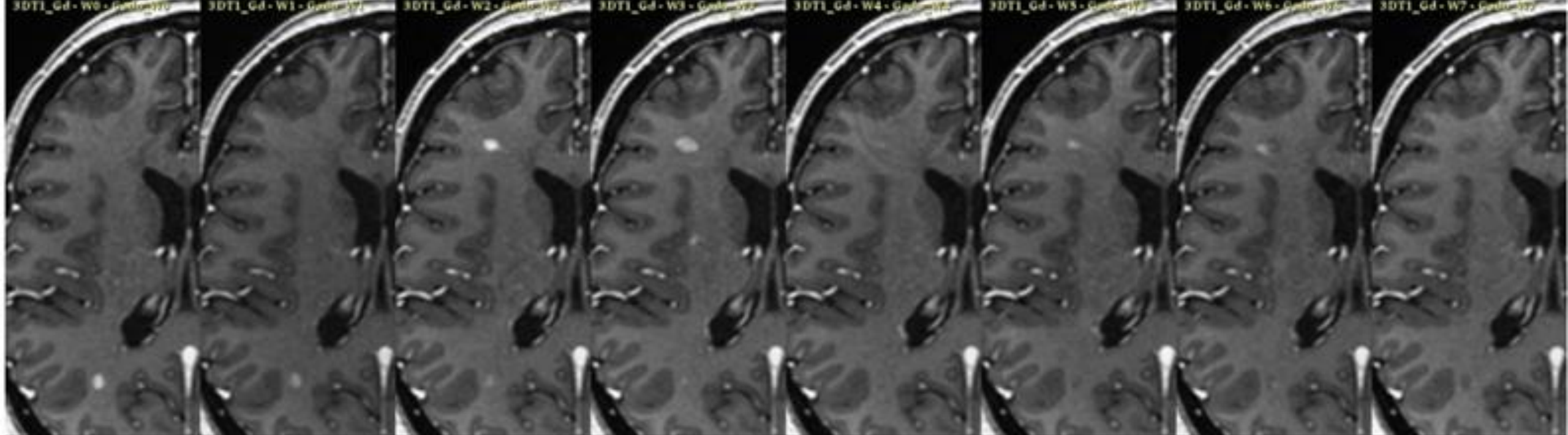






October 11, 1995







Not actual size





a·ha mo·ment

noun

informal

noun: aha moment; plural noun: aha moments; noun: a-ha moment; plural noun: a-ha moments

- 1. a moment of sudden insight or discovery.**
- 2. "it was one of those aha moments, when you know you have to risk it all"**





Label Text	Month
Vol 22, No 12 2077-2200	December
Vol 22, No 9 2079-2208	September
Vol 22, No 8 1761-2079	August
Vol 22, No 7 877-100, 1400-1700	July
Vol 22, No 6 815-70, 1247-1400	June
Vol 22, No 5 947-1246	May
Vol 22, No 4 711-946	April
Vol 22, No 3 525-710	March
Vol 22, No 1 81-82, 1-210	January
Vol 22, No 12 2101-140, 2706-2906	December
Vol 22, No 11 2583-2706	November
Vol 22, No 10 2333-2582	October

Multiple Sclerosis: Twenty Years on Low Fat Diet

Ray L. Swank, MD, PhD, Portland, Ore

each case of
signs or sym

The distri
rological disa
ble 2), and
(Table 3) are

The neuro
present study
0 Normal
logical
1 Normal

VIEWPOINT

Effect of low saturated fat diet in early and late

'those who adhered to the diet showed significantly less disability and lower mortality rates - Of those that survived, 95% remained physically active'

Materials and Methods

Patient Material.—Evaluation and discussion of the materials and methods were presented in detail in a previous paper.⁴ The more pertinent points, however, will be included here. From December 1948 to April 1954, 264 patients with

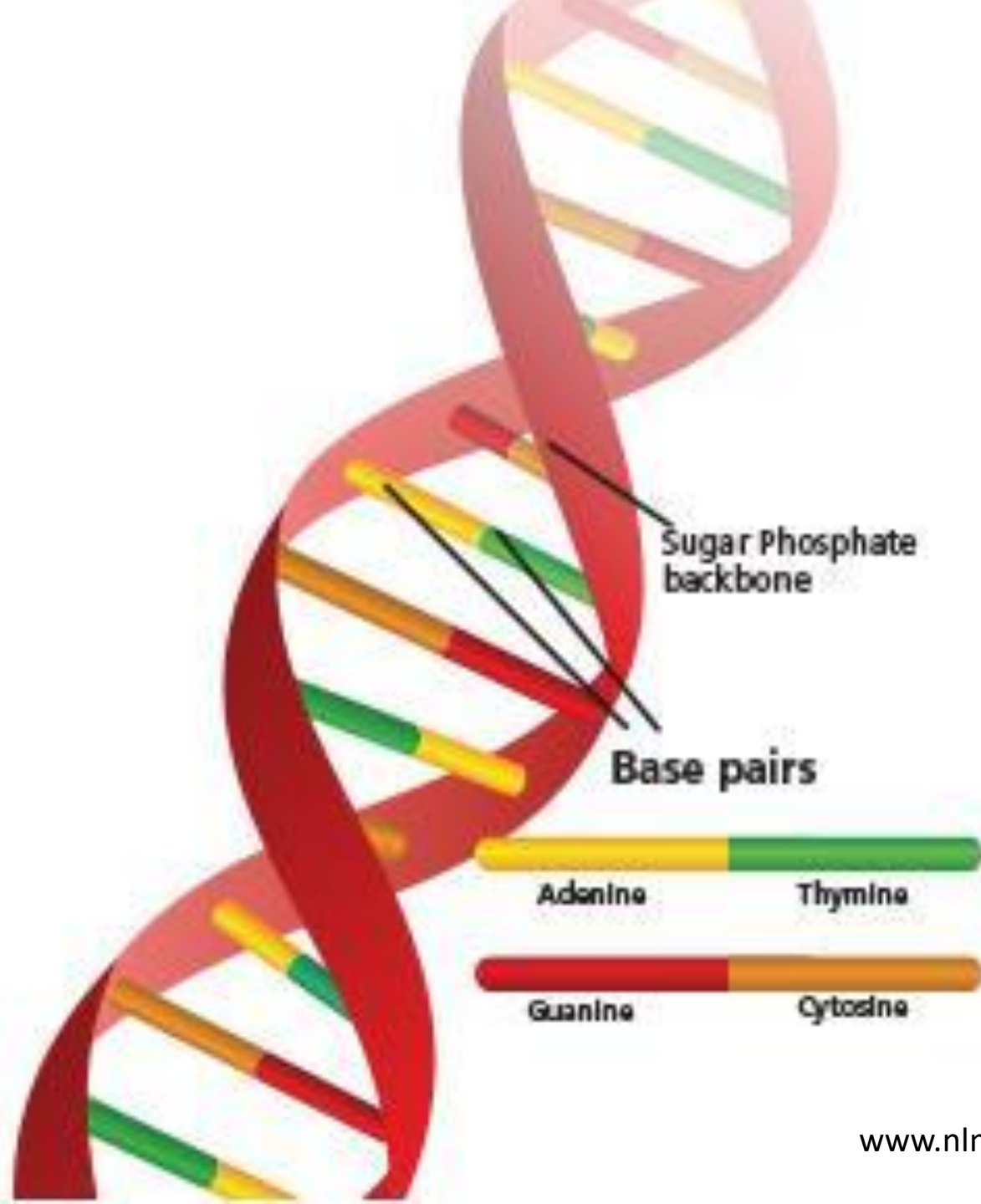
was the dead
The patie
four-week at
For the week
recorded eve
the patients
year. Food in
three months

Abstract

144 multiple sclerosis patients took a low-fat diet for 34 years. For each of three categories of neurological disability (minimum, moderate, severe) patients who adhered to the prescribed diet (≤ 20 g fat/day) showed significantly less deterioration and much lower death rates than did those who consumed more fat than prescribed (> 20 g fat/day). The greatest



It's your GENES!



Sugar Phosphate backbone

Base pairs

Adenine

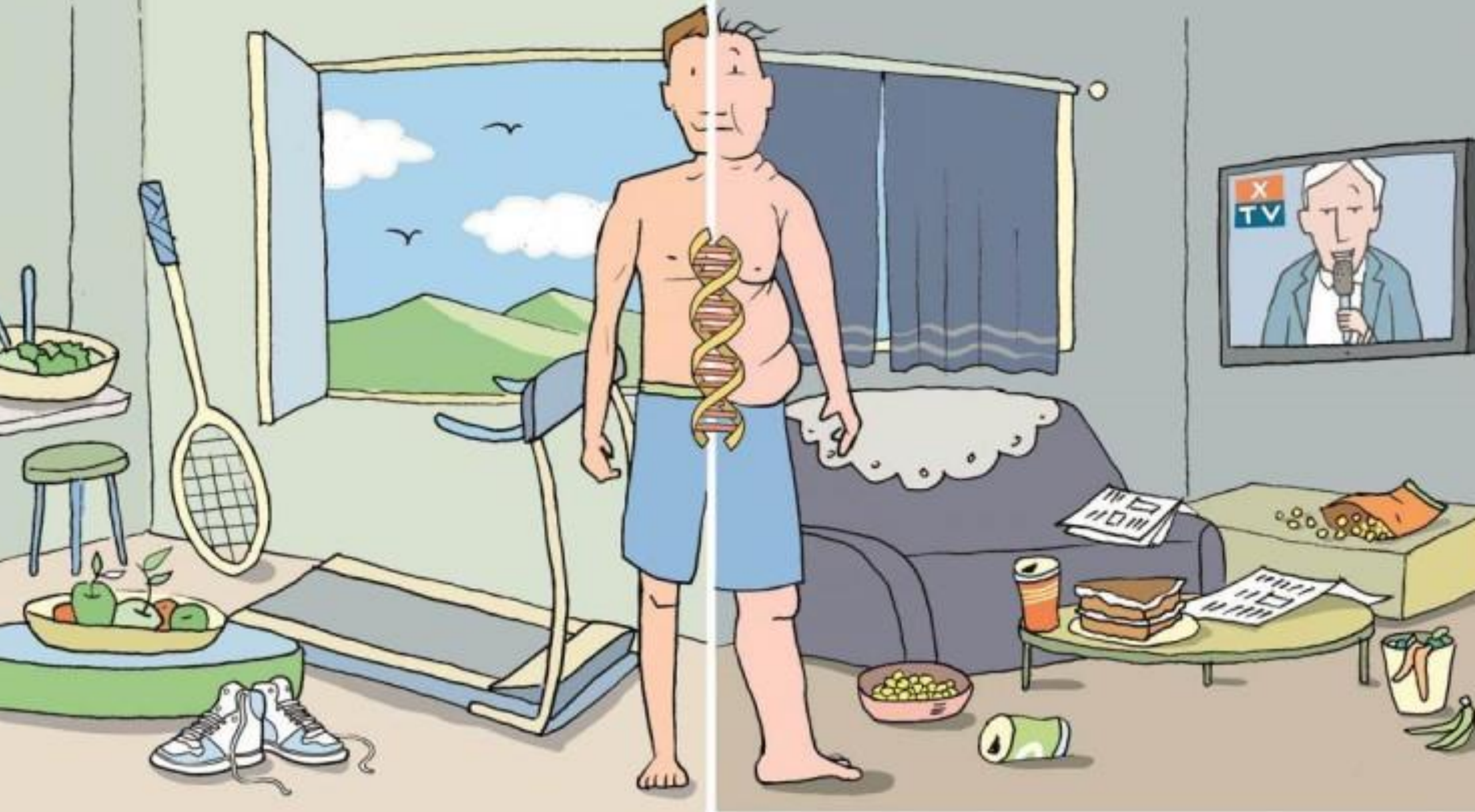
Thymine

Guanine

Cytosine

Table 2 Autoimmune diseases, showing female:male ratios of patients and concordance rates in monozygotic (MZ) twins

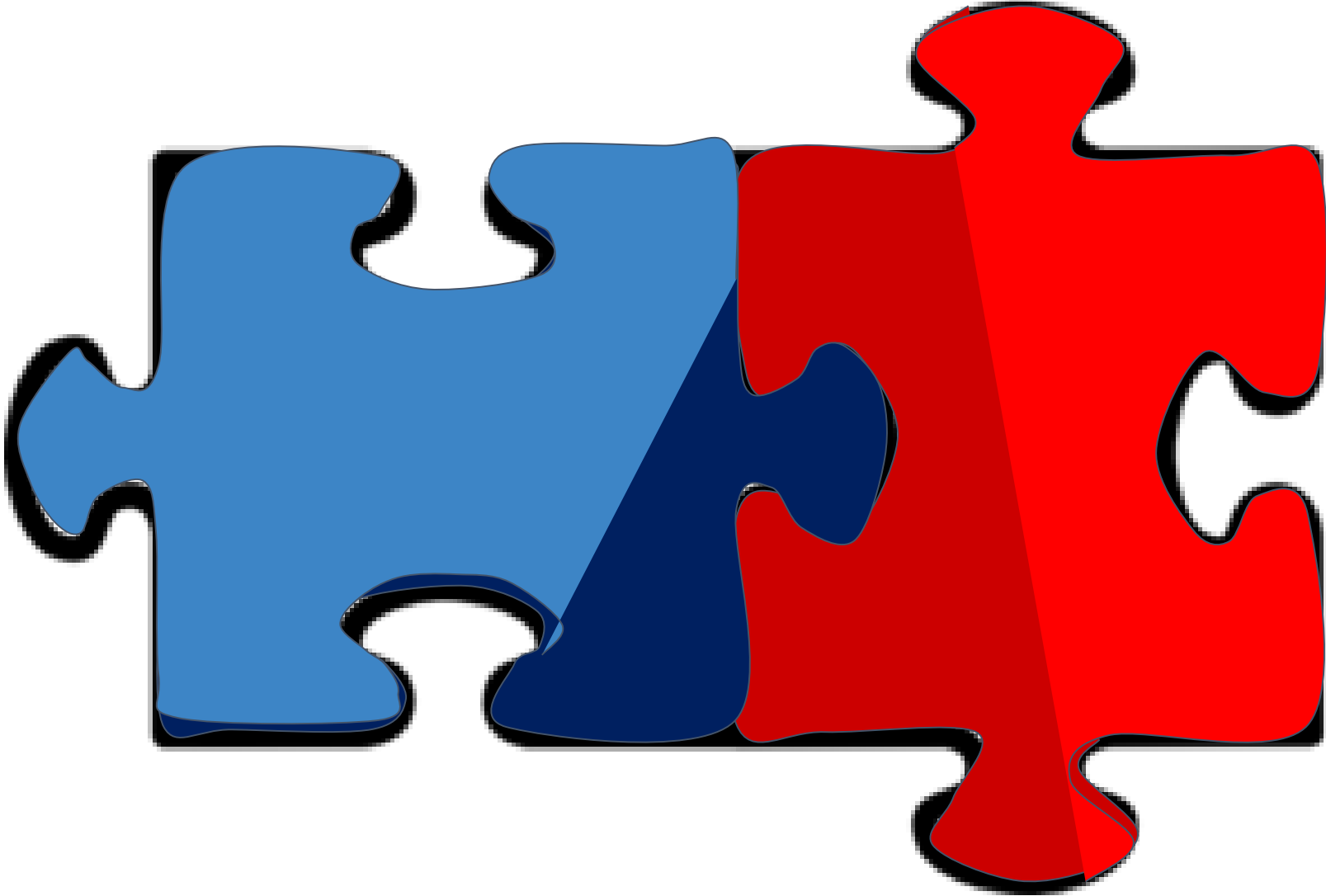
Disease	Target	Female:male ratio	Concordance in MZ twins
Multiple sclerosis	Central nervous system myelin	1.9–4.3:1 ^{140,235,236}	14%–33% ^{81,237–240}
Type 1 diabetes mellitus	Beta-islet cells of the pancreas	0.5–0.8:1 ^{241,242}	13%–60% ^{82,243–245} affected by genotype; ²⁴⁴ latitude ²⁴⁵
Systemic lupus erythematosus	Cell nucleus	8.7–13.1:1 ²⁴⁶	11%–33% ^{85,247–249}
Rheumatoid arthritis	Joints	2.7:1 ²⁵⁰	12%–15% ^{251–253}
Graves' disease	Thyroid	3.5:1 ²⁵⁴	17%–35% ^{255,256}
Primary biliary cirrhosis	Liver	9:1 ²⁵⁷	63% ²⁵⁸
Psoriasis	Skin	0.8–1.1:1 ^{242,259}	35%–70% ^{260,261}
Myasthenia gravis	Acetylcholine receptors	2:1 ²⁶²	35% ²⁶³
Ankylosing spondylitis	Joints	1:3 ²⁶⁴	40%–80% ²⁶⁵





May 2nd 2010







DEPARTMENT OF
VETERANS AFFAIRS

Saray Stancic, MD
Chief Infectious Diseases
VA Hudson Valley HCS

PO Box 100
Montrose, NY 10548

Telephone: (914) 737-4400 ext. 2688
Fax: (914) 788-4200
E-mail: Saray.Stancic@va.gov

10 Leading Causes of Death United States – 2016

1. Heart disease
2. Cancer
3. Chronic lower respiratory diseases
4. Accidents
5. Stroke
6. Alzheimer's disease
7. Diabetes
8. Influenza and pneumonia
9. Nephritis, nephrotic syndrome, and nephrosis
10. Intentional self-harm (suicide)

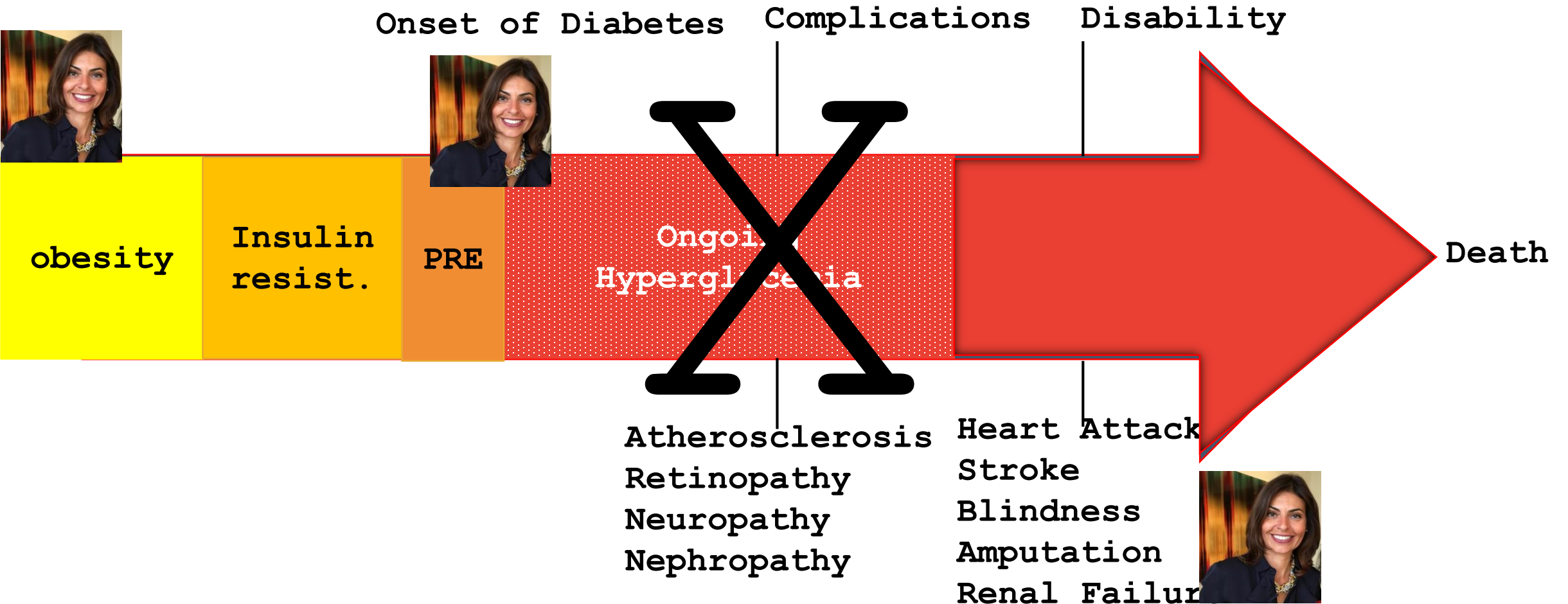








Natural history of T2DM





Volume	Page Range	Month
Vol 21, No 12	2077-3200	December
Vol 22, No 9	2079-2208	September
Vol 22, No 8	1761-2070	August
Vol 22, No 7	877-100, 1400-1700	July
Vol 22, No 6	815-70, 1247-1400	June
Vol 22, No 5	947-1246	May
Vol 22, No 4	711-946	April
Vol 22, No 3	525-710	March
Vol 22, No 1	81-82, 1-210	January
Vol 22, No 12	8105-140, 2795-2996	December
Vol 22, No 11	2583-2790	November
Vol 22, No 10	2333-2582	October

The New England Journal of Medicine

Copyright © 2002 by the Massachusetts Medical Society

VOLUME 346

FEBRUARY 7, 2002

NUMBER 6



REDUCTION IN THE INCIDENCE OF TYPE 2 DIABETES WITH LIFESTYLE INTERVENTION OR METFORMIN

DIABETES PREVENTION PROGRAM RESEARCH GROUP*

ABSTRACT

Background Type 2 diabetes affects approximately 8 percent of adults in the United States. Some risk factors — elevated plasma glucose concentrations in the fasting state and after an oral glucose load, overweight, and a sedentary lifestyle — are potentially reversible. We hypothesized that modifying these factors with a lifestyle-intervention program or the administration of metformin would prevent or delay the development of diabetes.

Methods We randomly assigned 3234 nondiabetic persons with elevated fasting and post-load plasma glucose concentrations to placebo, metformin (850 mg twice daily), or a lifestyle-modification program with the goals of at least a 7 percent weight loss and at least 150 minutes of physical activity per week.

TYPE 2 diabetes mellitus, formerly called non-insulin-dependent diabetes mellitus, is a serious, costly disease affecting approximately 8 percent of adults in the United States.¹ Treatment prevents some of its devastating complications^{2,3} but does not usually restore normoglycemia or eliminate all the adverse consequences. The diagnosis is often delayed until complications are present.⁴ Since current methods of treating diabetes remain inadequate, prevention is preferable. The hypothesis that type 2 diabetes is preventable^{5,6} is supported by observational studies and two clinical trials of diet, exercise, or both in persons at high risk for the disease^{7,8} but not by studies of drugs used to treat diabetes.⁵

Diabetes Prevention Program

~3200 Pre-diabetics

Metformin

Lifestyle

Placebo

31%

58%



1. Eat a healthy diet
2. No smoking
3. Exercise 3.5
hours/week
4. Maintain a healthy
weight

Overall 80% Reduction in Chronic Diseases

93% of diabetes, 81% of heart attacks, 50% of strokes, and 36% of cancers would

4 out of 5
heart attacks
prevented

BE
THE CHANGE
THAT
YOU WISH TO SEE
IN
THE WORLD.

MAHATMA GANDHI







Diet
and Nutrition
I think I missed
those classes
in Medical school?

But the reality is...

ONLY 1 IN 4



medical schools meets federal requirements
for nutrition education.⁶



Physicians are considered by the public to be the best, **most credible source** of information about nutrition.⁵

The problem...

Upon graduation,
Less than half
believe nutrition
is important

Medical
Do not
nutrition

94%

of physicians
feel that
nutrition
counseling
should be part
of primary care
visits, but only

14%

feel qualified to
offer it.¹⁸



aths





**CODE BLUE
ELEVATOR**



**ELEVATOR # 22
PATIENT AND EMERGENCY MEDICAL
EQUIPMENT
PHONE 60290**

**This elevator has been designated
for Patient and Emergency Medical
Equipment transportation ONLY.**

Please use adjacent elevators for

An aerial photograph of a person walking on a light-colored dirt path that runs through a lush green field. The person is wearing a purple long-sleeved shirt and dark pants. Their shadow is cast long and dark on the path ahead of them, indicating the sun is low in the sky. The path is flanked by vibrant green grass on both sides.

codeblue

redefining the practice of medicine

a film by Marcia Machado

SEAWATER Productions presents CODE BLUE
executive producers DILIP BARMAN, MARJORIE ROSWELL,
JEFF SCHRAGER and SARAY STANCIC edited by FEDDE
produced and directed by MARCIA MACHADO

www.codebluedoc.com

“As medicine and health care delivery in our nation continue to evolve in new and exciting ways, the US medical education system, which is based largely on an education mode more than a century old, has not kept pace.”

-American Medical Association

Source Report :Accelerating change in medical education: creating the medical school of the future 2015

Antiquated Medical Education Model

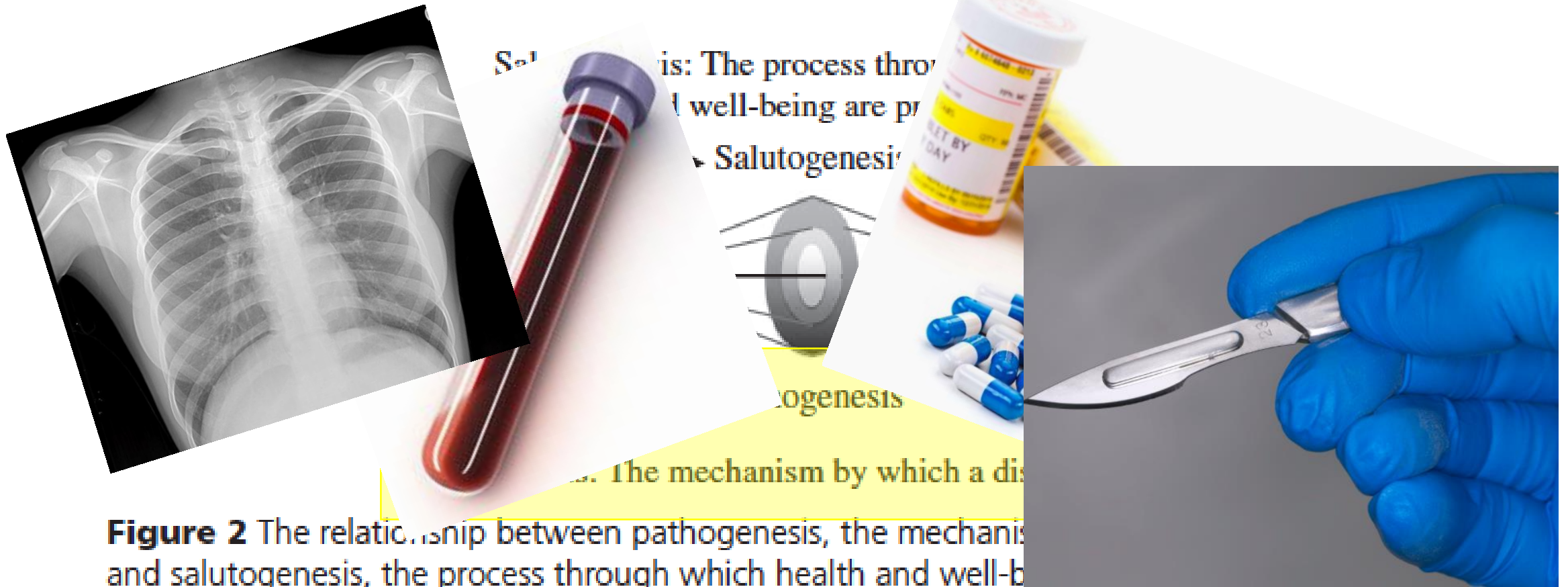


Figure 2 The relationship between pathogenesis, the mechanism by which a disease develops, and salutogenesis, the process through which health and well-being are promoted. B. Jonas, MD, and Samueli Institute (www.SamueliInstitute.org). Reproduced with permission.

Antiquated Medical Education Model

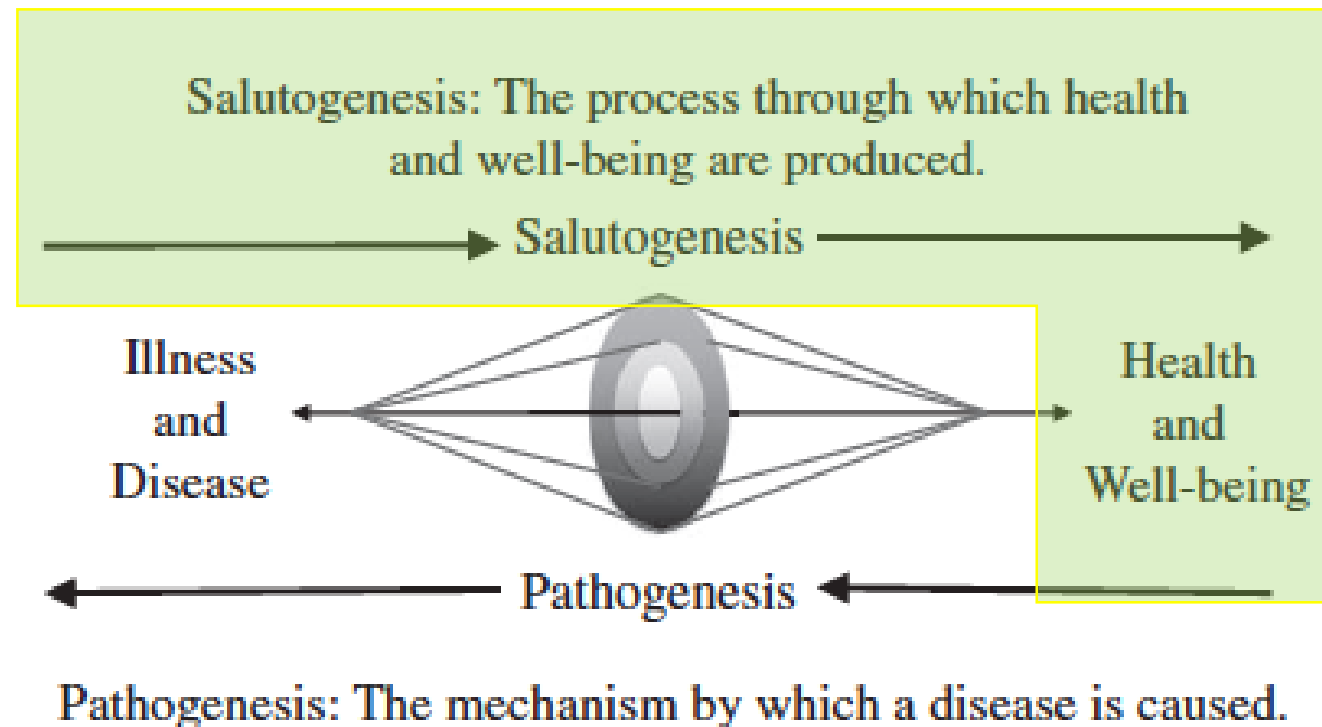


Figure 2 The relationship between pathogenesis, the mechanism by which a disease is caused, and salutogenesis, the process through which health and well-being are produced. Credit: Wayne B. Jonas, MD, and Samueli Institute (www.SamueliInstitute.org). Reproduced with permission.

Salutogenesis medical education model

"Future curricula would include modules on nutrition, exercise, sleep, mindfulness, self care, and developing cutting edge skills to support expertise in counseling patients on behavioral change."

A new
generation of
physicians
empowered to
address
the current
healthcare
climate



I will respect the hard-won scientific gains of those physicians in whose steps I walk, and gladly share such knowledge as is mine with those who are to follow.

I will apply, for the benefit of the sick, all measures [that] are required, avoiding those twin traps of overtreatment and therapeutic nihilism.

I will remember that there is art to medicine as well as science, and that warmth, sympathy, and understanding may outweigh the surgeon's knife or the chemist's drug.

I will prevent disease whenever I can,

responsibility must be faced with great humbleness and awareness of my own frailty. Above all, I must not play at God. prevention is preferable to

cure. I will remember that I do not treat a fever chart, a cancerous growth, but a sick human being, whose illness may affect the person's family and economic stability. My responsibility includes these related problems, if I am to care adequately for the sick.

I will prevent disease whenever I can, for prevention is preferable to cure.

I will remember that I remain a member of society, with special obligations to all my fellow human beings, those sound of mind and body as well as the infirm.

If I do not violate this oath, may I enjoy life and art, respected while I live and remembered with affection thereafter. May I always act so as to

Thank you!

drstancic.com

codebluedoc.com



@drstancic



Saray Stancic M.D.



@StancicMD

codeblue

redefining the practice of medicine

a film by Marcia Machado

SEAWATER Productions presents CODE BLUE
executive producers DILIP BARMAN, MARJORIE ROSWELL,
JEFF SCHRAGER and SARAY STANCIC edited by FEDDE
produced and directed by MARCIA MACHADO

www.codebluedoc.com