

Life Style Modification

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Life Style Modification

- What is LSM?
 - SNAP
- Evidence for LSM
- 5As framework for organizing preventive care
- LSM
 - Obesity
 - Nutrition
 - Exercise
 - Alcohol
 - Smoking

Health Promotion

- Health promotion is the process of **enabling people** to increase **control over, and to improve**, their health. It moves beyond a focus on individual behaviour towards a wide range of social and environmental interventions.

-WHO-

- Opportunistic health promotion is an essential task in a family practice consultations
- LSM is a strategy for health promotion

What is life style modification?

- Lifestyle modification involves **altering long-term habits**, typically of eating or physical activity, and **maintaining the new behaviour** for months or years.

Which of the following is the most common NCD in Sri Lanka

1. Diabetes
2. Cardiovascular disease
3. Cancer
4. Chronic respiratory disease

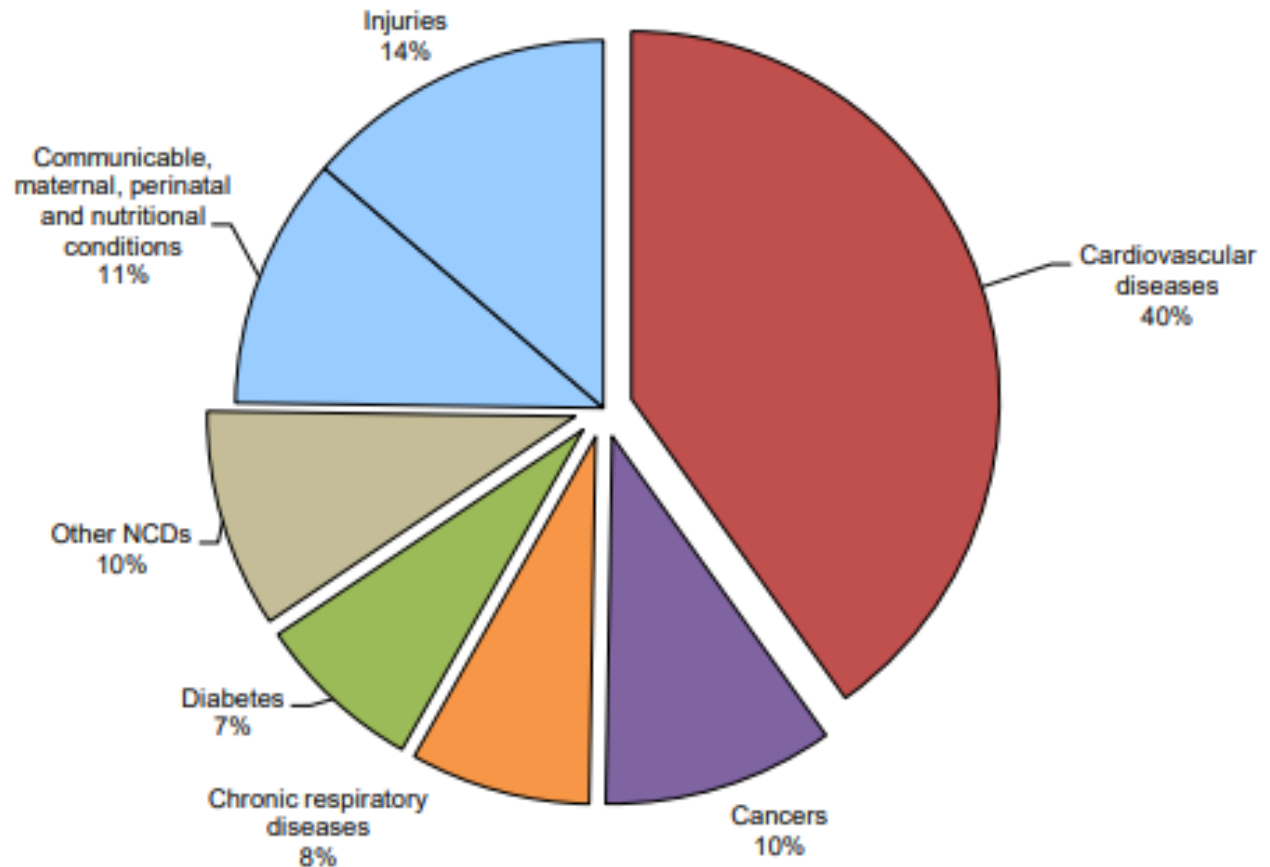
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Total deaths: 138,000

NCDs are estimated to account for 75% of total deaths.

“NCDs are estimated to account for 75% of total deaths in Sri Lanka”

4 leading NCDs in SL

- Cardiovascular disease
- Diabetes
- Cancer
- Chronic respiratory disease



SNAP

**Smoking
Nutrition
Alcohol
Physical activity**

LSM – Evidence

- American Heart Association 2020 impact goals / metrics
 1. not smoking
 2. a normal body mass index (BMI)
 3. physical activity
 4. a healthy diet
 5. normal cholesterol
 6. normal blood pressure,
 7. a normal fasting plasma glucose
- An analysis from the National Health and Nutrition Examination Survey showed that individuals **who met five of the seven ideal metrics had a 78% reduction in the hazard ratio for all cause mortality.**

LSM – The Evidence

- From the INTERHEART study that included 52 countries, it is estimated that **modifiable risk factors account for 90% of the population attributable risk for heart disease** in men, and 94% of the risk in women.

‘There is no pill, and there never will be any pill, that can reduce the burden of chronic disease in the way that healthy lifestyle factors can.’

- then why don't we use LSM?

When should we consider LSM for our patients?

At every consultation

5As framework

- The 5As is a key framework for **organising the provision of preventive care** in primary care.
- This includes the actions taken by healthcare providers in supporting their patients to change their risk
- To bring about LSM we use the 5As framework

5A's

Ask	<ul style="list-style-type: none">• identify patients with risk factors
Assess	<ul style="list-style-type: none">• level of risk factor and its relevance to the individual in terms of health• readiness to change/motivation
Advise	<ul style="list-style-type: none">• provide written information• provide a lifestyle prescription• brief advice and motivational interviewing
Assist	<ul style="list-style-type: none">• pharmacotherapies• support for self-monitoring
Arrange	<ul style="list-style-type: none">• referral to special services• social support groups• phone information / counselling services• follow up with the GP

Assessing the patient's readiness to change

- LSM can only be initiated if the patient is ready to change. Can result in frustration and may hamper future weight loss attempts.
- **Assess**
 - Motivation
 - Support
 - Psychological state
 - Stressful life events
- **Readiness = balance between two opposing forces**
 - (1) motivation / pts desire to change
 - (2) resistance / pts resistance to change
- **Obtain the readiness to change with a scale**
 - 0 – not so important
 - 10 – very important

What percentage of adults in Sri Lanka are over weight?

1. 35%
2. 25%
3. 20%
4. 15%
5. 10%



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Obesity in Sri Lanka

- 2005 - The prevalence of overweight and obesity was 20.3% in men and 36.5 % in women
- 2010- Sri Lankan adults
 - overweight – 25.2%
 - obese – 9.2%
 - centrally obese - 26.2%
- 2010 -Associated factors with OW/OB
 - female sex
 - urban living
 - higher education
 - higher income
 - being in the middle age

Which of the following is considered normal BMI for SL?

1. <18.5
2. 18.5 – 22.9
3. 18.5 – 24.9



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2015 Obesity Guidelines SLCE

Obesity according to BMI for SL

	Sri Lanka	Caucasians
Underweight	<18.5	<18.5
Normal	18.5 – 22.9	18.5 – 24.9
Overweight	23 – 24.9	25 – 29.9
Obesity – class I	25 - 30	30 – 34.9
Obesity – class II	30 - 35	35-39.9
Obesity – class III	>35	>40

2015 Obesity Guidelines SLCE

5As for Overweight / Obesity

ASK	ACCESS	ADVISE/ AGREE	ASSIST	ARRANGE
Overweight / Obesity	BMI, WS Other CV risk factors	Advice of benefits on weight loss Set goals of 5-10% weight loss	Provide tailored weight management plan	Telephone coaching Weight loss program Follow up visits

How to assess nutrition

- Ask to describe (or maintain a record), in detail, the diet taken on a typical day
 - breakfast to dinner
 - any food or drink in between –snacks
 - alcohol



Build a Healthy Plate

- ✓ Make half your plate fruits and vegetables.
- ✓ Choose non-fat or low-fat (1%) dairy products.
- ✓ Include lean protein sources.
- ✓ Make half your grains whole grains.



Decrease portion sizes.

**Eat and drink less,
especially with
high calorie items.**

Be active your way.

**Be active to maintain
a healthy weight
and prevent excess
weight gain.**

Limit empty calories.

**Choose foods and
drinks with less
solid fat and
added sugars.**

Cook more often at home.

**Planning ahead can
help you make better
food choices.**

5As for Nutrition

ASK	ACCESS	ADVISE/ AGREE	ASSIST	ARRANGE
Diet	Diet Description of a typical day food intake (Fruit, Vegetables, Sugary drinks, fat and salt)	Set goals for portions of fruit & veges. Reduction of salt and sugar	Individualize diet plan based on guide lines	Telephone coaching, Weight loss program, Follow up visits

What is exercise?

- Any form of physical activity / movement at a greater intensity than usual
- Exercise
 - Raises the heart rate
 - Works your muscles
 - Archives physical fitness

Types of exercise

- **Aerobic**

- Improves oxygen consumption of the body
 - Brisk walking, running, dancing, swimming playing

- **Anaerobic**

- Muscle building type
 - Strength exercises



Which of the following is correct regarding recommendations on exercise for adults?

1. 30 minutes of moderate aerobic activity twice a week
2. 150 minutes of moderate aerobic activity every week
3. 60 minutes of moderate aerobic activity daily
4. 60 minutes of moderate anaerobic activity daily
5. 20 minutes of moderate anaerobic activity daily

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How much of exercise is needed? (19 – 64 yrs)

- At least 150 minutes of moderate aerobic activity every week
 - 30 min a day for 5 days of the week
 - 10 min X 3 times a day
- plus
 - Strength exercises on two or more days a week for all muscle groups

LSM

- ✓ What is LSM?

 - ✓ SNAP

- ✓ Evidence for LSM

- ✓ 5As framework for organizing preventive care

- ✓ LSM

 - ✓ Obesity

 - ✓ Nutrition

 - ✓ Exercise

 - Alcohol

 - Smoking

Alcohol

- Prevalence of current drinkers were 39.6% among males and 2.4% among females
- The most consumed type
 - beer (76.9%)
 - spirits (51.5%)
 - wine (25.8%)
 - kasippu (22.2%)
 - palmyrah toddy (16.9%)
 - toddy (16.8%)
- National alcohol use prevalence survey in Sri Lanka 2014

Safe drinking limits

- Men
 - 2 standard drinks per day
- Women
 - 1 standard drinks per day
 - no alcohol during a pregnancy
- All
 - 1-2 days alcohol free / week
 - Cannot add 2-3 days quota on weekends

STANDARD DRINKS



**SPARKLING
WINE**

100 mL

13% alc/vol



WINE

100 mL

13% alc/vol



**LIGHT
BEER**

425 mL

2.7% alc/vol



**REGULAR
BEER**

285 mL

4.9% alc/vol



**FORTIFIED
WINE**

60 mL

20% alc/vol



SPIRITS

30 mL

40% alc/vol

EACH OF THESE IS ONE STANDARD DRINK. A STANDARD DRINK CONTAINS APPROX. 10 GRAMS OF PURE ALCOHOL

5As Hazardous drinking

ASK	ACCESS	ADVISE/ AGREE	ASSIST	ARRANGE
Hazardous drinking	Alcohol intake dependence and readiness to change	Information and motivational interviewing	Pharmacotherapy	Follow-up AA NGO services

Problem drinker?

CAGE Questionnaire

- Have you ever felt you should **C**ut down on your drinking?
- Have people **A**nnoyed you by criticizing your drinking?
- Have you ever felt bad or **G**uilty about your drinking?
- Have you ever had a drink first thing in the morning to steady your nerves or to get rid of a hangover (**E**ye opener)?

Scoring:

Item responses on the CAGE are scored 0 or 1, with a higher score an indication of alcohol problems. A total score of 2 or greater is considered clinically significant.

Smoking

- NO safe limit.
- Pack Years

No. of packs/day \times No. of years the person has smoked

5As Smoking

ASK	ACCESS	ADVISE/ AGREE	ASSIST	ARRANGE
Smoking	Amount smoked Dependence Readiness to change	Brief advice and Motivational interviewing Set a quit date	Quit plan Consider pharmacothera py	Follow-up visit Telephone or SMS?

How to assess nicotine dependence

Assess nicotine dependence

Nicotine dependence can be briefly assessed by asking:

- Minutes after waking to first cigarette?
- Number of cigarettes per day?
- Cravings or withdrawal symptoms in previous quit attempts?

Indication of nicotine dependence

- Smoking within 30 minutes of waking
- Smoking more than 10 cigarettes per day
- History of withdrawal symptoms in previous quit attempts.

Also consider patient's previous experience and views on pharmacotherapy

LSM - summary

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 - SANP
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Any problems with Gosoapbox?

Thank you