HOW HEALING WORKS

WHAT IT MEANS FOR YOUR PRACTICE, YOUR PATIENTS AND THE FUTURE OF HEALTHCARE

@DrWayneJonas
How do we get from *health care* to *health and wellbeing*?
INTRODUCING JOE & SALLY
SALLY’S HISTORY

• Sally was an executive VP
• Had a car accident
• Developed LBP – it persisted
  • X-Ray, CT, MRI, etc.
  • NSAIDS and physical therapy
  • TENS – electrical stimulation
  • Injections with steroids
  • Opioids
• Behavioral medicine
• Opioid recovery
Making the medical diagnosis and treatment plan

*Asking*

“What’s the matter?”

- **Subjective** – what the patient describes
- **Objective** – what you observe and test
- **Assessment** – the diagnosis and CPT code
- **Plan** – your treatment and its access
SALLY’S “TEAM”

- Primary Care Physician
- Physical therapist
- Pain specialist
- Surgeon
- Behavioral medicine
- Pharmacologist/Pharmacist
OPIOID PRESCRIPTIONS have increased by 60% from 2000–2010

OPIOID-RELATED DEATHS topped 60,000 in 2017

11.8 MILLION Americans misused opioids
NON-PHARMACOLOGICAL APPROACHES TO PAIN
• Therapeutic massage
• Yoga
• Acupuncture
• Spinal manipulation
• Mind-body
The Culture
Exploring a patient’s personal determinants of health

* Asking “What Matters?”*
WHAT MATTERED FOR SALLY
• Medication management
• Heat and stretching
• Sleep and stress
• A place and time to heal
• Loss of purpose
SALLY’S TEAM

- Physician
- Pharmacologist
- Behaviorist
- Yoga therapist
- Her family
- Her body!
A DIFFERENT TYPE OF HEALTH CARE

INTEGRATIVE HEALTHCARE

CONVENTIONAL MEDICINE

COMPLEMENTARY & ALTERNATIVE MEDICINE

SELF-CARE

CULTURAL CONTEXT OF HEALTH
• We are **FIRST** in spending
• **37**\(^{th}\) in health
• **25%** of the GNP by 2025
• Health disparities are **INCREASING**
NAS/IOM: SHORTER LIVES, POORER HEALTH

- Infant mortality
- Homicides and injuries
- HIV & AIDS
- Drug-related deaths
- Teen pregnancy & STIs
- Obesity & diabetes
- Heart & lung disease
PER CAPITA HEALTH EXPENDITURES & LIFE EXPECTANCY

WHERE HEALTH COMES FROM

15–20% Medical treatment

Behavior & Lifestyle Impacts

Social & Economic Impacts

Environment

69 y/o Navy Veteran in hospital with an MI
Father with MI and 65 y/o – died at 75
Stopped smoking at 35 y/o
Hypertension since 42 y/o
Gained weight after he left Navy
Type II DM showed up at 55 y/o
Good medical care – full benefits
JOE'S HISTORY

• 69 year old male
• Father with MI and 65 y/o – died at 75
• 40 years in Navy food services
• Stopped smoking at 35 y/o
• Hypertension since 40 y/o
• Gained weight in and after left Navy
• Type II DM showed up at 47 y/o

Good medical care – full benefits

“From Scratch”

“Industrial food”
JOE’S SOAPs

• Hypertension – HCTZ, ACE inhibitor
• Elevated LDL cholesterol – statin
• Type II DM – metformin
• Obesity – one visit with a dietician
• Now post an myocardial infarction
• Stent and a beta-blocker
• Cardiac rehabilitation – exercise
WHAT MATTERED FOR JOE

• Medication management
• Prevent further disease
• Fitness and food
• Family & friend support
• Giving back to society
JOE’S INTEGRATIVE HEALTH TEAM

• Physician
• Pharmacologist
• Nutritionist
• Chef and health coach
• His family and friends
• His mind!
HEALTH & WELLBEING

EMPOWER & SUPPORT self-care

INTEGRATE conventional, complementary and lifestyle

EVIDENCE SHOWS that patients managing their care are healthier
CAN WE DO THIS WITHIN OUR CURRENT SYSTEM?
INTEGRATIVE HEALTH IN THE MILITARY
INTEGRATIVE HEALTH IN THE VETERANS HEALTH ADMINISTRATION

• 18 Centers of Excellence in Integrative Health
• Whole Health – whole persons, all vets
• Patients set goals
• Health care team helps them get there
WHOLE HEALTH IN THE VETERANS HEALTH ADMINISTRATION

THE PERSONAL HEALTH INVENTORY

EMPOWER
Explore What Matters Most
Peers

EQUIP
Self-Care
Skill Building and Integrative Health

TREAT
Clinical Care
Whole Health Clinicians

THE PERSONAL HEALTH PLAN

Community
Healing Environments
Healing Relationships

https://www.va.gov/patientcenteredcare/explore/about-whole-health.asp
5% of patients account for 50% of all medical costs

THE COST OF CARE

ADVANCED ILLNESS

AT-RISK, MULTIPLE CHRONIC CONDITIONS

HEALTHIEST

21–100%

6–20%

RISING RISK

5%

1%

.25%
COST SAVINGS & BETTER OUTCOMES: SHORT & LONG TERM

INTEGRATED CARE
- Care coordination
  - Hospital (re)admissions and ED visits
  - Primary care and specialists
  - Lab/ Imaging/ Prescriptions

5%

INTEGRATIVE HEALTH
- Health promotion
  - Lifestyle as prevention and treatment
  - Health coaches and IM practices
  - Lab/ Imaging/ Supplements

95%
VALUE-BASED CARE: ONE FOOT IN ONE FOOT OUT
• Do an Integrative Visit using a PHI and HOPE Note
  • Reframe questions and goals to address health determinants
• Add Simple Methods
  • Ear acupuncture, mind-body, nutrition, safe supplements
• Advanced Healing Technologies
  • HRV Biofeedback, CES devices, behavioral apps, telehealth
• Re-design Teams for Health
  • Health coaching, team care, group visits, shared decisions

CONTINUE STANDARD CARE — the care you already provide
WHAT PATIENTS CAN DO

FOCUS ON SELF CARE — what works for you now

- Find your meaning – take the Personal Health Inventory (PHI)
  - What matters to you? What brings you joy?
- Ask provider to do an Integrative Health Visit and HOPE Note
  - Explore how the areas of your life impact your health
- Develop your own health care team and plan
  - Traditional, complementary & alternative providers, health coaches, choose one simple change for Monday!
THE HOPE NOTE TOOLKIT
DOING AN INTEGRATIVE HEALTH VISIT

Resources available at
DrWayneJonas.com/Hope

Healing Oriented Practices & Environments

1. PREPARATION
Preventing and managing chronic disease requires considering all aspects of a person’s life—focusing not just on treating disease, but also on promoting health. This requires fully integrating preventive care, complementary care and self-care into the prevention and treatment of disease, illness, and injury. Learn how and how to pay for it.

2. HOPE VISIT
HOPE consists of a set of questions geared to evaluate those aspects of a patient’s life that facilitate or detract from healing. The goal is to identify behaviors that support healing and serve as a tool for delivering integrative health care through a routine office visit. Download tools to get you started.

3. CONTINUING SUPPORT
After an integrative health visit, the hard work will begin for the patient. You can make it easier by connecting the patient’s priorities and health goals to medical advice, and offering support in implementing the changes. Access resources that will help your patients with making behavior changes.

LEARN MORE
LEARN MORE
LEARN MORE
THE PERSONAL HEALTH INVENTORY

• WHY DO YOU WANT TO BE HEALTHY?

• HOW IS YOUR HEALTH AND WELLBEING NOW?

• WHAT PERSONAL DETERMINANTS OF HEALTH ARE YOU READY TO IMPROVE?
THE HOPE NOTE QUESTIONS

A PERSONAL HEALTH PLAN

1. BODY & EXTERNAL
   - What is your home like?
   - Your work environment?
   - Do you get out in nature?

2. BEHAVIOR & LIFESTYLE
   - How is your diet?
   - How is your sleep?
   - How is your stress?
   - How is your activity level?

3. SOCIAL & EMOTIONAL
   - How is your social support?
   - How was your childhood?

4. SPIRITUAL & MENTAL
   - Why do you want to be healthy?
   - What is most important for you in your life?

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DrWayneJonas.com provides information and tools for physicians, health professionals and patients to improve health and wellbeing.

"The most powerful way to transform healthcare, your patients lives and your own practice is to fill your medical bag with tools for healing."
YOU CAN START NOW

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