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U.S. NEEDS A NEW PARADIGM FOR PRIMARY HEALTHCARE

(Chicago, IL)— With physical inactivity causing nearly 6 million deaths per year in the U.S., and obesity and physical inactivity together generating some $222 billion in annual healthcare costs, it is time for healthy-lifestyle assistance to become a recognized medical intervention and standard of care.

The case for a paradigm shift in primary care is made in a commentary published this month by Mayo Clinic Proceedings. The paper is co-authored by Ross Arena, PhD, PT, FAHA, FACSM, FAACVPR, professor and head of physical therapy at the University of Illinois at Chicago College of Applied Health Sciences.

“Our current healthcare model appropriately places the physician as the lead provider,” said Arena. “But in the medical school curriculum, very little attention is paid to healthy lifestyle interventions, despite what we know about preventing chronic disease through healthy behaviors like exercising regularly, eating a healthy diet and not smoking. A more effective healthcare model would involve integration of healthy lifestyle specialists beyond the physician, working as a team to achieve a common goal.”

In the commentary, “The healthy lifestyle team is central to the success of accountable care organizations,” Arena and co-author Carl J. Lavie, MD, propose a new model in which care is provided by a “healthy lifestyle team” comprising doctors and nurses as well as exercise physiologists, nutritionists/dietitians, behavioral counselors, physical therapists and occupational therapists—all collaborating to evaluate, diagnose and prescribe interventions that prevent onset or progression of non-communicable diseases, increasingly referred to as “lifestyle-related diseases.” The authors illustrate how these professionals should work together to provide comprehensive, holistic and tailored care to each patient, with the patient as an equal partner in decision-making.

Beyond improved health outcomes for individuals, there is an emerging business case for the team approach to care, the authors argue. Under the Affordable Care Act, healthcare providers treating Medicare patients are encouraged to form groups, called accountable care organizations, that coordinate care for a defined population of patients. ACOs are financially rewarded for keeping patients healthy and, in some cases, they are fined for incurring costs associated with repeat visits, extraneous medical procedures or hospitalizations.

“There’s no longer any mystery about the best way to keep people healthy when it comes to chronic disease,” said Arena. “Recent large-scale studies show that 60 to 80 percent of premature cardiovascular events, such as stroke and heart attacks, could be prevented through healthy lifestyle choices.”

“Healthy living is medicine,” Arena added, “Using teams of specialists who are equipped to prescribe lifestyle interventions, in the correct ‘doses’ for each individual, would radically reduce chronic disease and associated costs in the U.S. Prevention really is always better than cure.”

Established in 1979, the College of Applied Health Sciences at the University of Illinois at Chicago is a multi-disciplinary community of health sciences scholars, educators, and more than 1,800 students who promote health and well-being for people of all abilities, particularly those living in urban environments. Degrees and certificates are offered on campus and/or online in the departments of Biomedical and Health Information Sciences, Disability and Human Development, Kinesiology and Nutrition, Occupational Therapy, and Physical Therapy. For more information, visit www.ahs.uic.edu.