

# The Failure of Lifestyle

Mark Sandoval, M.D.



A wooden gavel with a dark brown handle and a rounded head is positioned diagonally across the right side of a white document. The document is placed on a stack of light brown, textured paper. A silver paperclip is attached to the left edge of the white document. The background is a dark wood surface with a prominent grain.

**NONE**

**DISCLOSURE  
STATEMENT**

# Objectives

- Discuss the treatment benefit of lifestyle factors as measured in Quality Adjusted Life Years (QALY's).
- Show how the typical approach to lifestyle interventions fails at securing the maximum treatment benefit as measured in QALY's.
- Discover a Biblical approach to lifestyle interventions that secures the maximum treatment benefit as measured in QALY's.
- Encourage participants to apply this Biblical approach in the treatment of their patients, regardless of their practice setting.



ornish

lifestyle medicine

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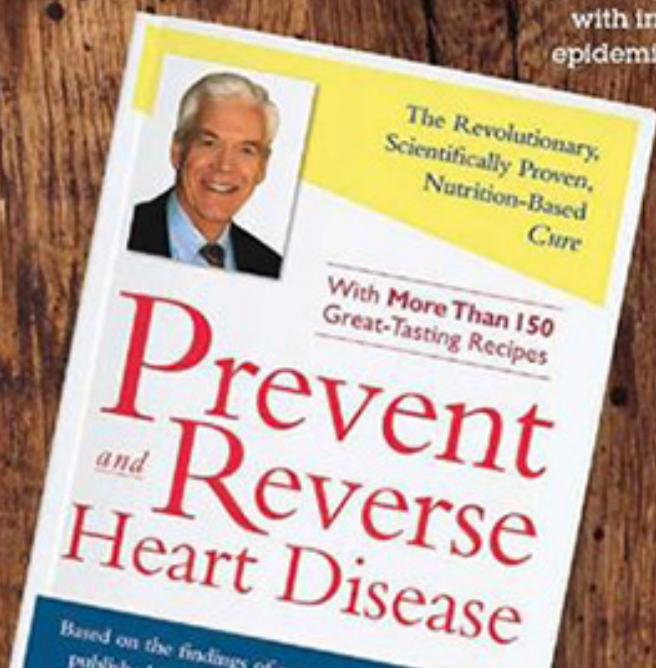
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# American College of Lifestyle Medicine

*Treating the Cause*





# Quality Adjusted Life Years (QALY)

- QALY – a measure of health or disease burden which includes the quality and the quantity of life lived. It assumes that health is a function of length of life *and* quality of life, and combines these values into a single index number.





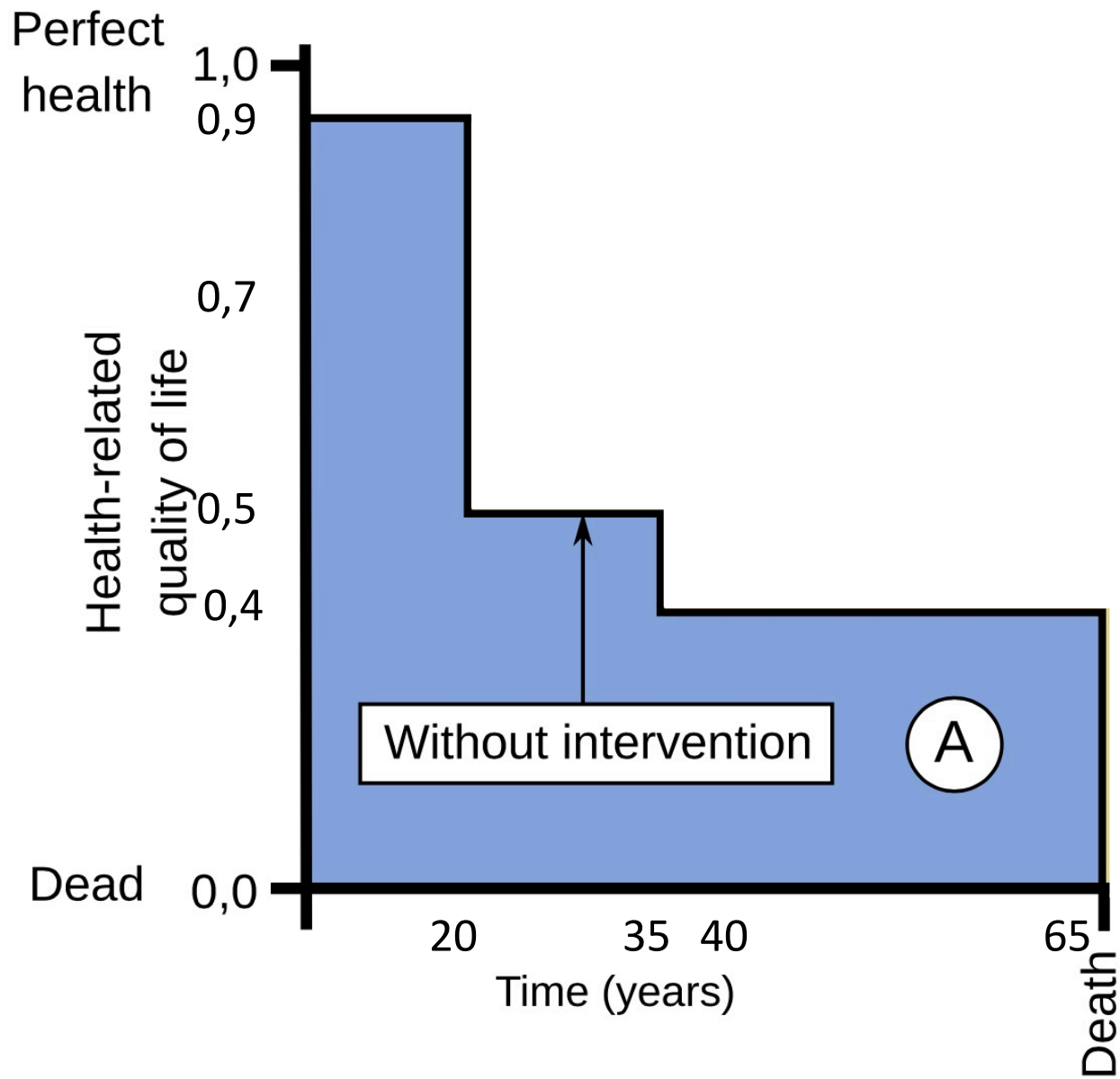
# Calculations

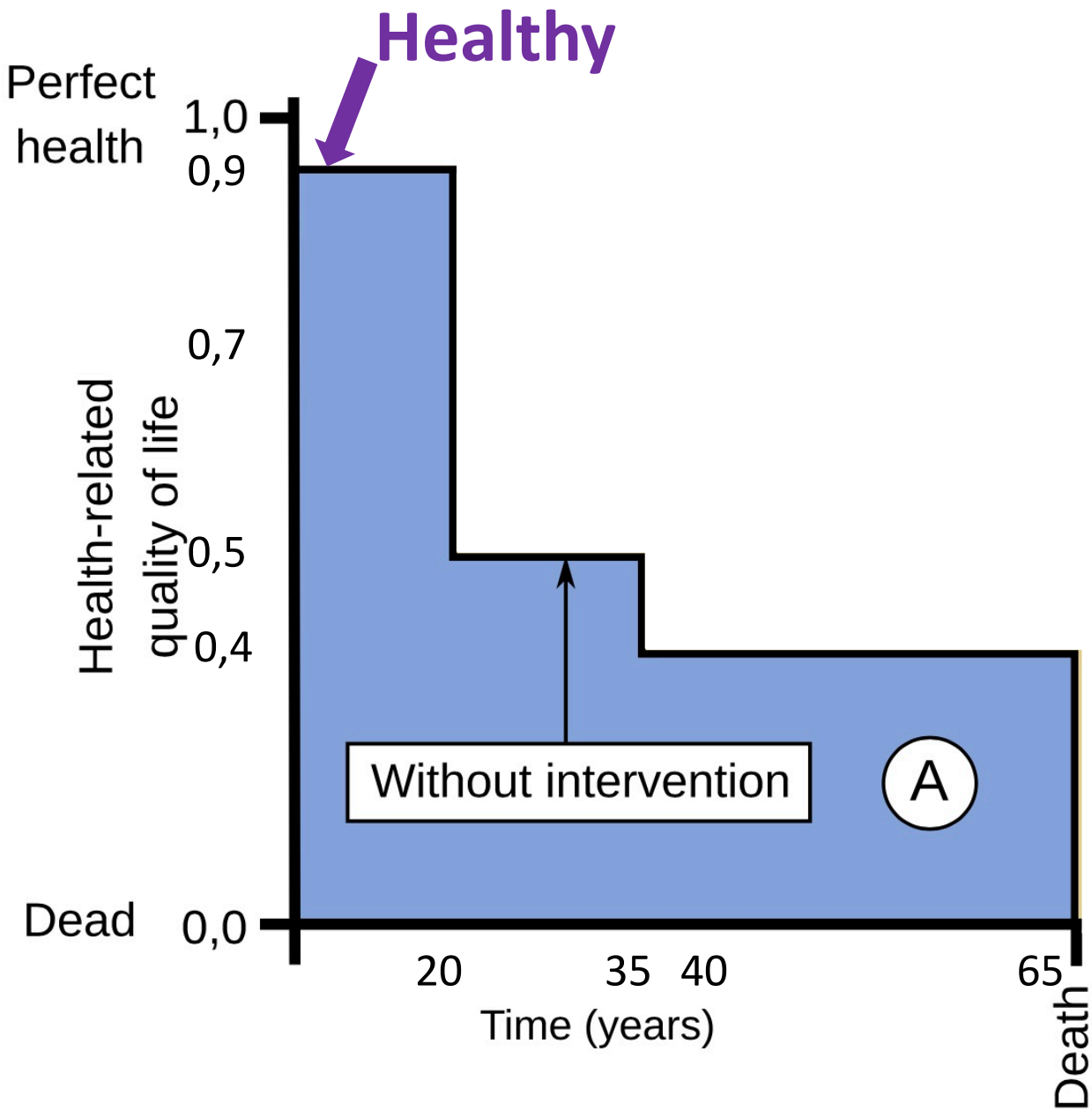
- To determine QALYs, one multiplies the utility value associated with a given state of health by the years lived in that state.
- Perfect health = 1
- Death = 0
- Stroke with hemiparesis = 0.4

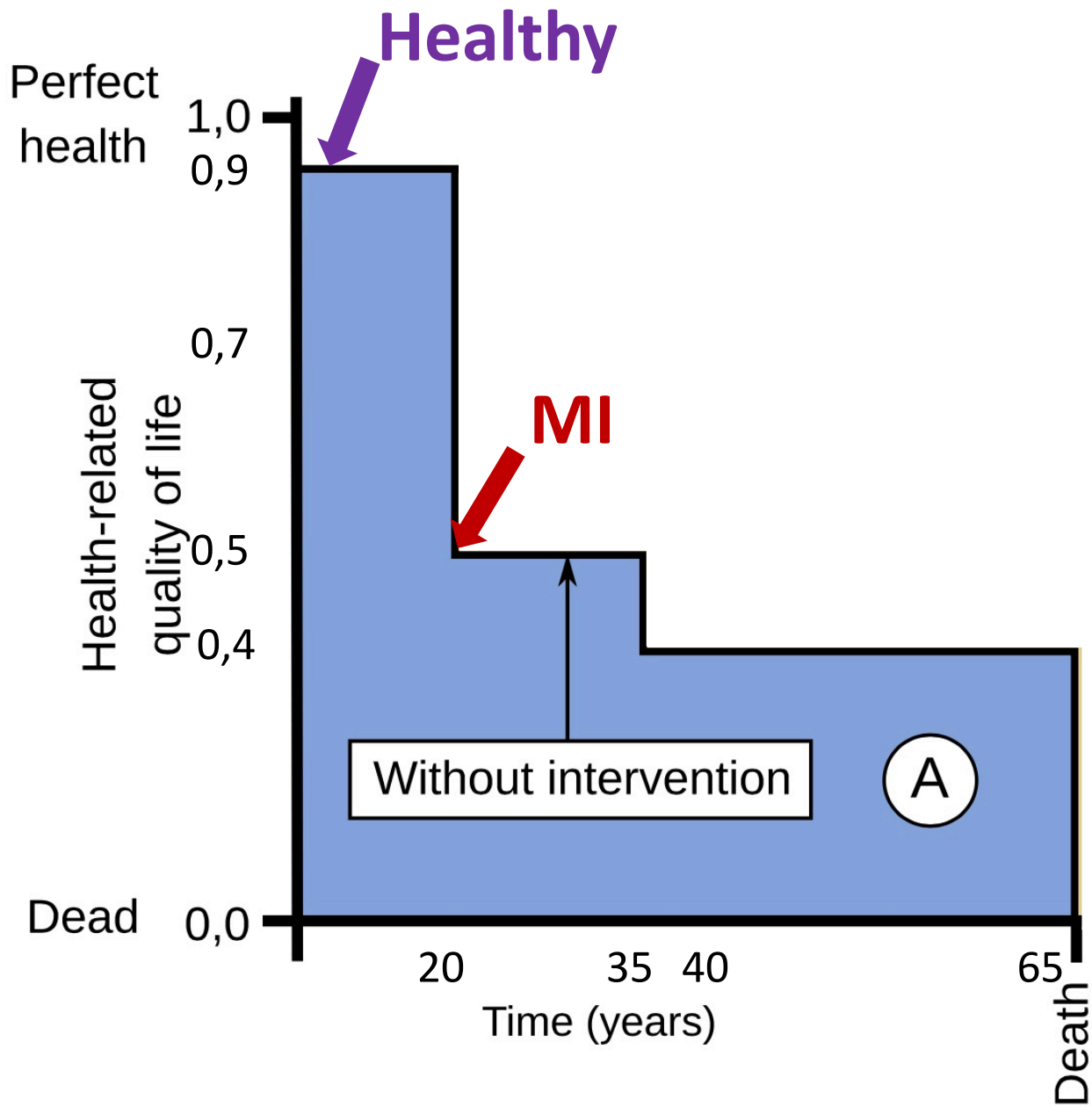


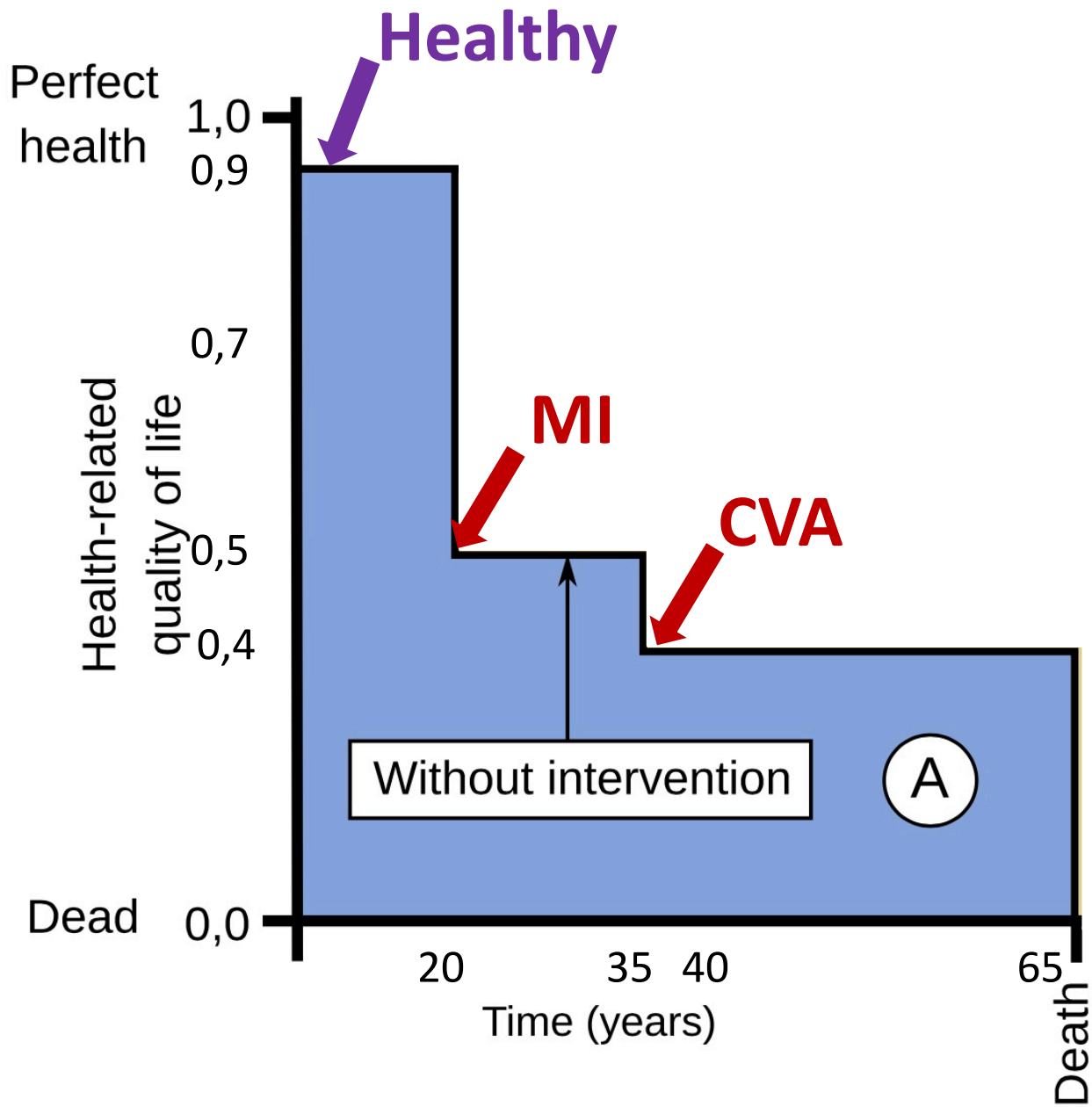
# Calculations

- A year of life lived in perfect health is worth 1 QALY (1 year of life  $\times$  1 Utility value).
- 1 year of life lived in a situation with utility 0.5 (e.g. bedridden, 1 year  $\times$  0.5 Utility) is assigned 0.5 QALYs.
- $\frac{1}{2}$  a year lived in perfect health is equivalent to 0.5 QALYs (0.5 years  $\times$  1 Utility).

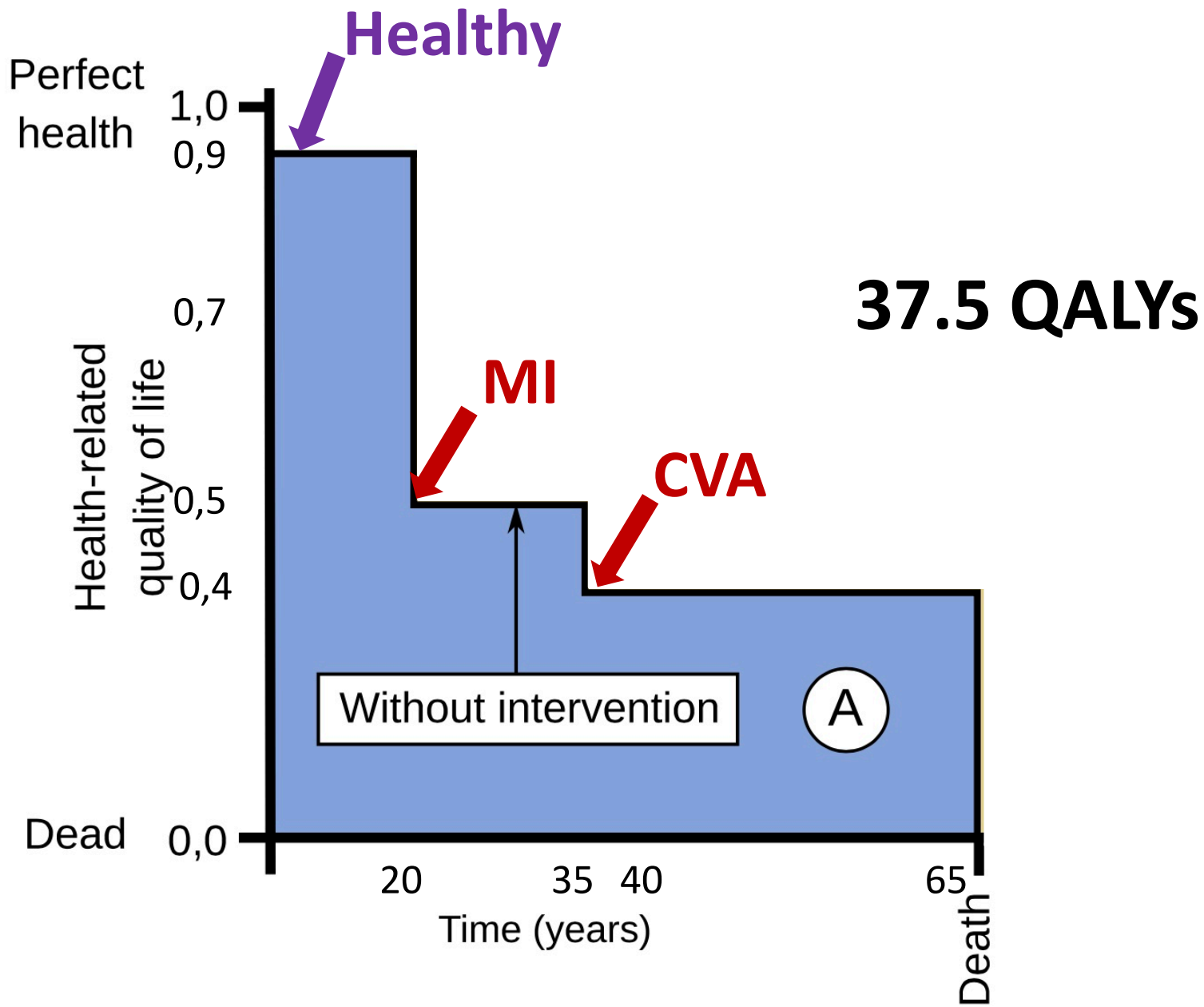


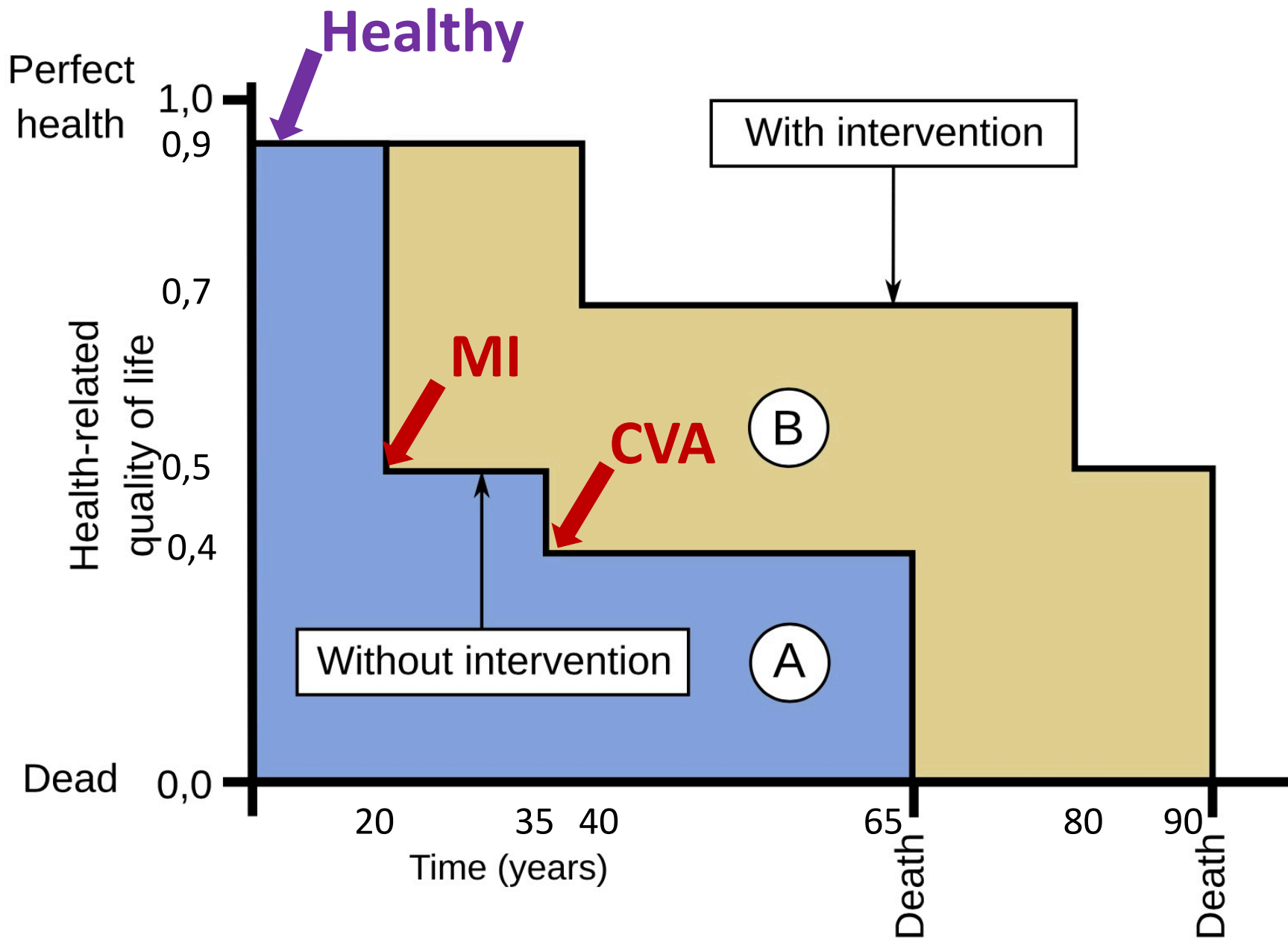


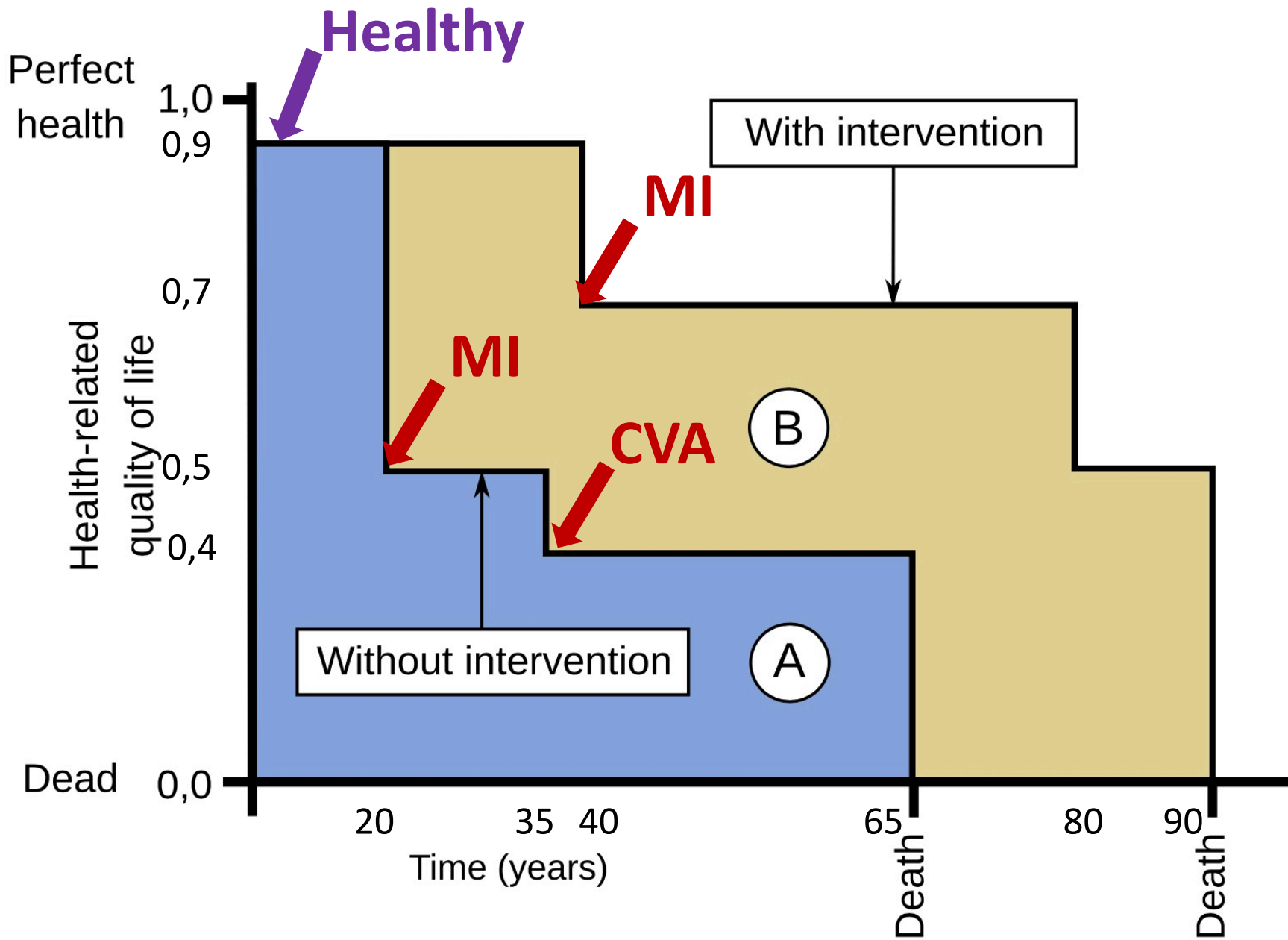


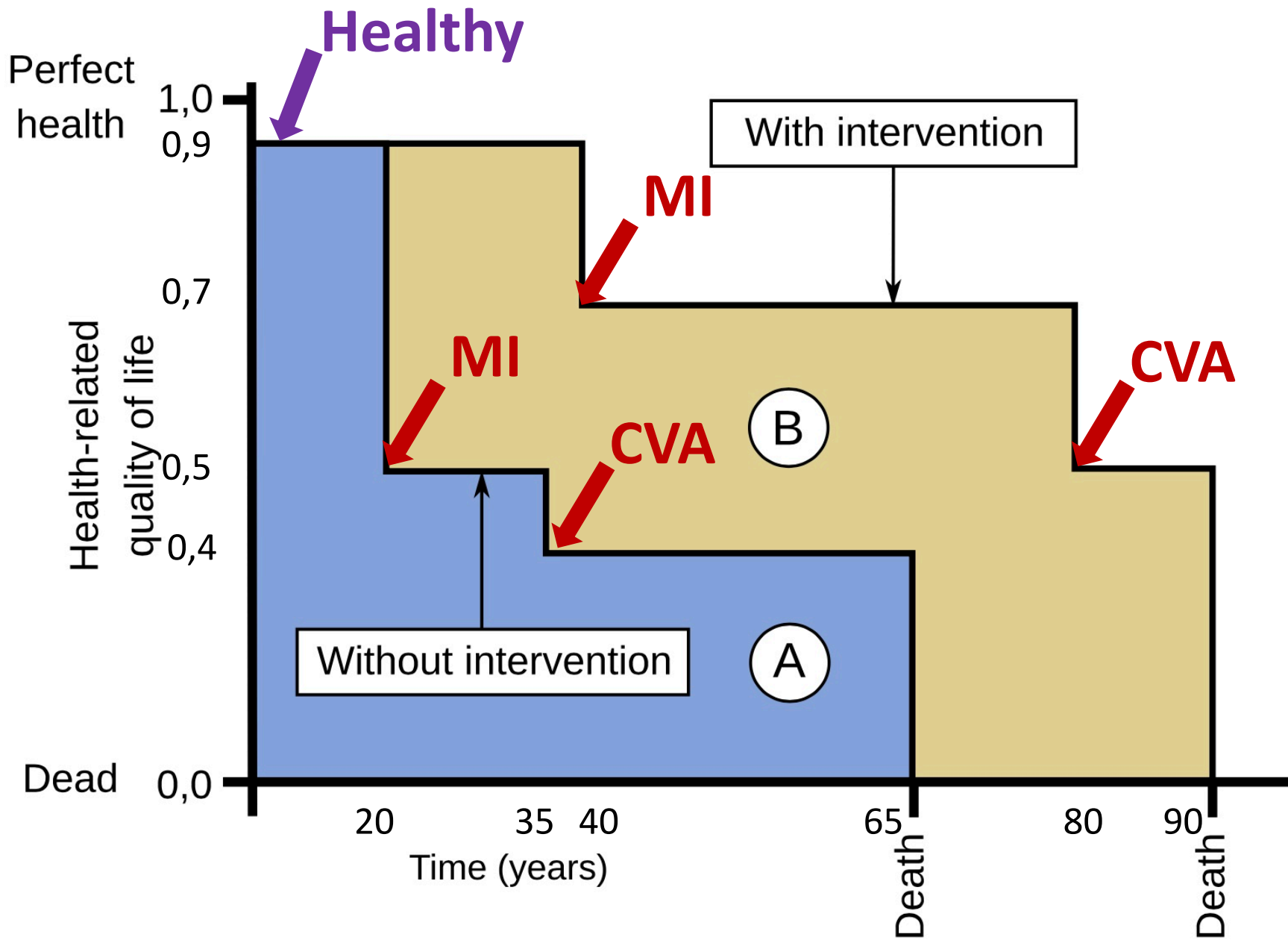


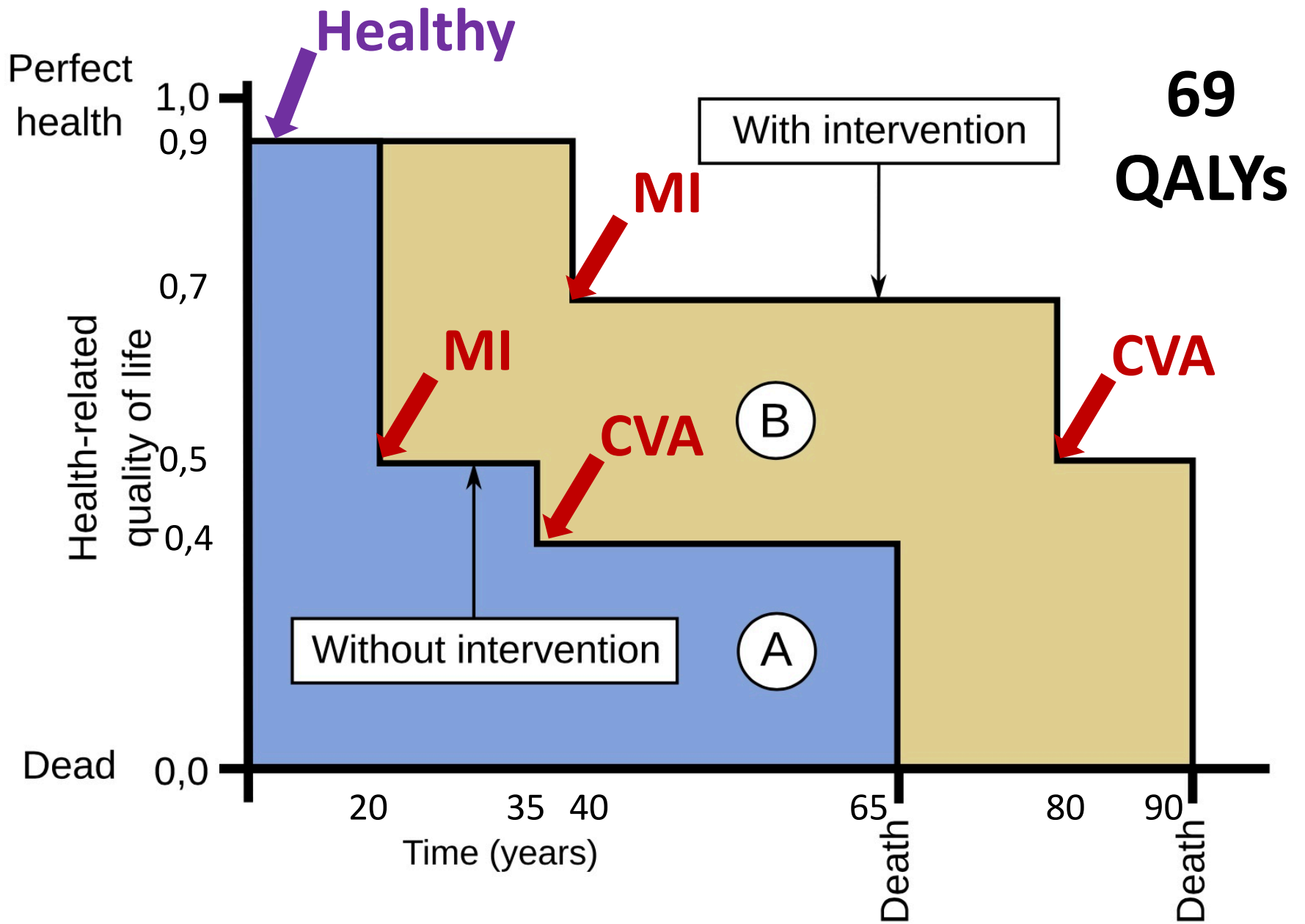


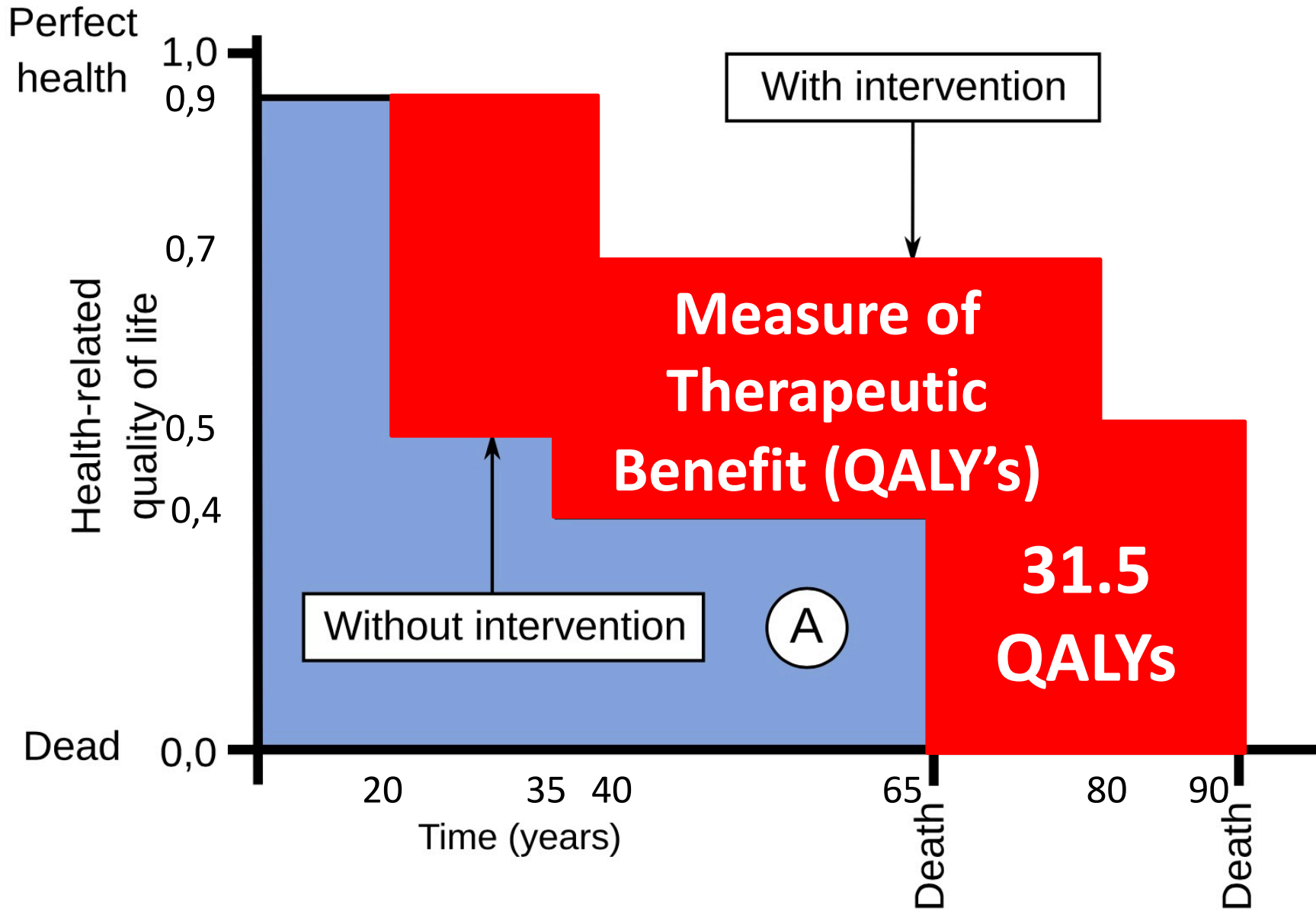












# Lifestyle Factors & QALY's

- EPIC-NL (prospective) n=33,066, 14 yrs f/u
- 1 point each for:
  - Never smoker
  - BMI <25
  - Physically active
  - High adherence to a Mediterranean Diet

# Lifestyle Factors & QALY's

Table 3

**Regression Coefficients for the relation between healthy lifestyle score and QALYs (N=33,066).**

	N	mean QALY	Adjusted <sup>a</sup>	P for linear trend
Healthy lifestyle score				
0	621	73.40	ref	<0.0001
1	7192	74.41	0.97 (0.62, 1.32)	
2	13824	74.93	1.35 (1.01, 1.70)	
3	9215	75.25	1.58 (1.23, 1.93)	
4	2214	75.48	1.75 (1.37, 2.13)	

<sup>a</sup>Adjusted for age at baseline, gender, educational level, alcohol and energy intake.

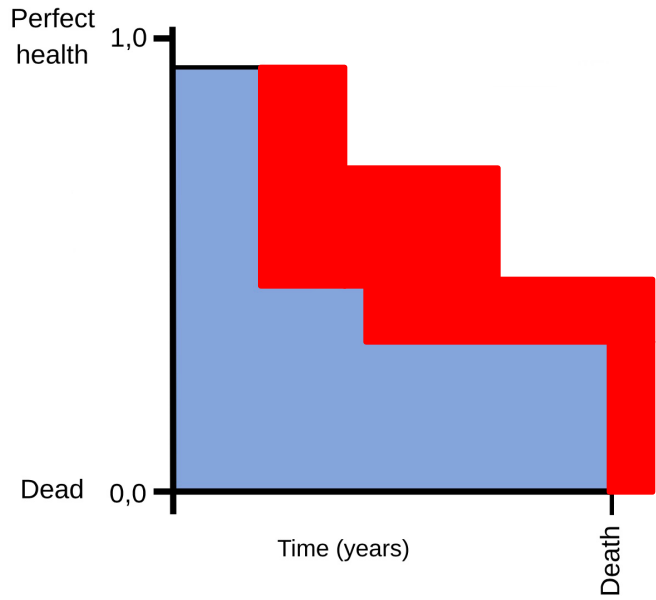


# Smoking, Alcohol, Physical Inactivity, Obesity & QALY's in 25-year-olds

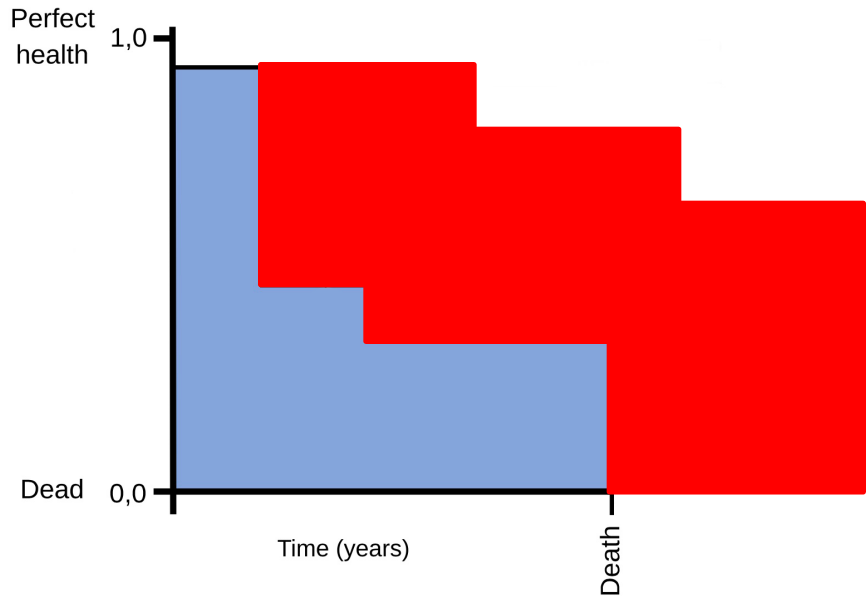
- Heavy smoker vs. non-smoker: (-)10-11 QALY's
- High EtOH consumption (Men): (-) 5 QALY's
- High EtOH consumption (Women): (-) 3 QALY's
- Sedentary vs. physically activity: (-) 7 QALY's
- Obesity (Men): (-) 3 QALY's
- Obesity (Women): -6 QALY's

# Smoking Cessation & QALY's ( $\geq 65$ y/o)

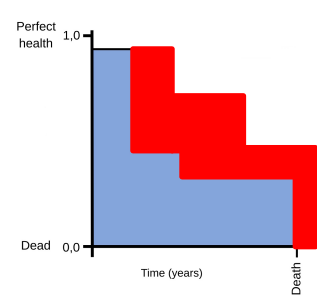
- Never smoker 16.1 QALY
- Former smoker 12.7 QALY
- Current smoker 7.3 QALY
- Began  $<18$  y/o 6.0 QALY
- Began  $\geq 18$  y/o 8.5 QALY
- Smoking  $<20$ /day 8.1 QALY
- Smoking  $\geq 20$ /day 6.6 QALY
- Potential gains for quitting 5.4.QALY



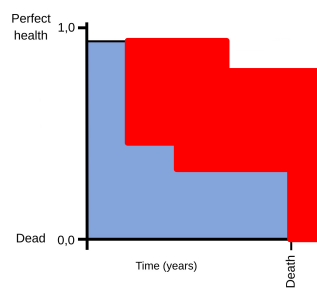
**Treatment A**



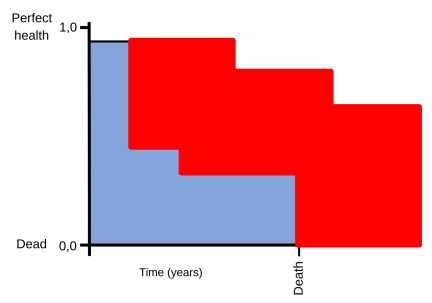
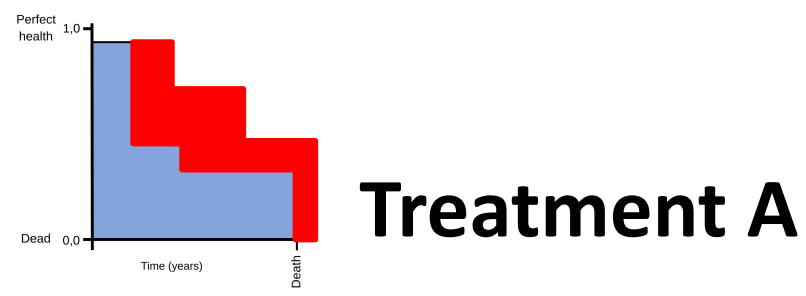
**Treatment B**



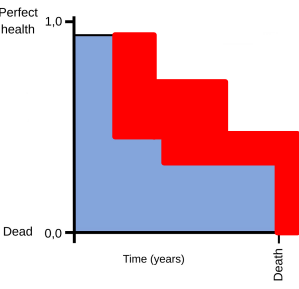
**Treatment A**



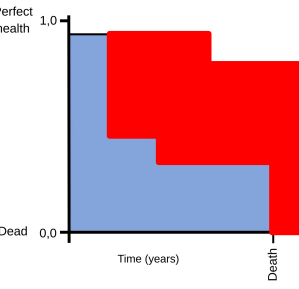
**Treatment B**



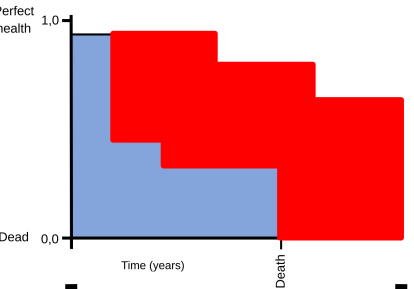
**Treatment C** 



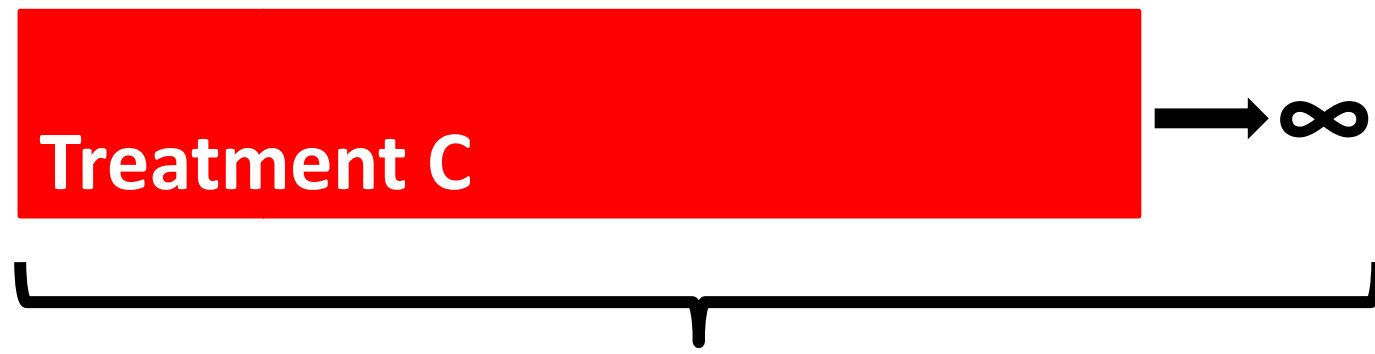
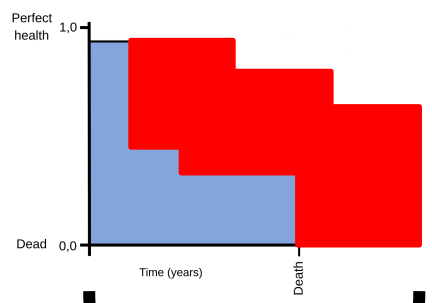
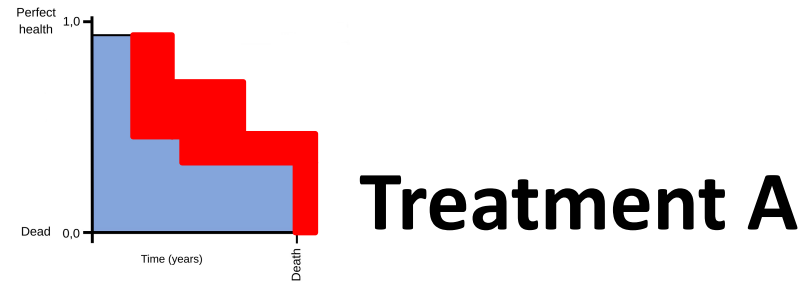
**Treatment A**



**Treatment B**



**Temporal**



**Temporal**

**Eternal**

# Perspective

- Any intervention that can affect eternity is infinitely more potent than the greatest intervention that can merely affect this temporal life
- As wise practitioners, we must understand the need to influence eternal interests
- We must become wise in applying modalities that impact eternal interests
- If we fail to impact eternity, we fail of any real significance or success in our profession



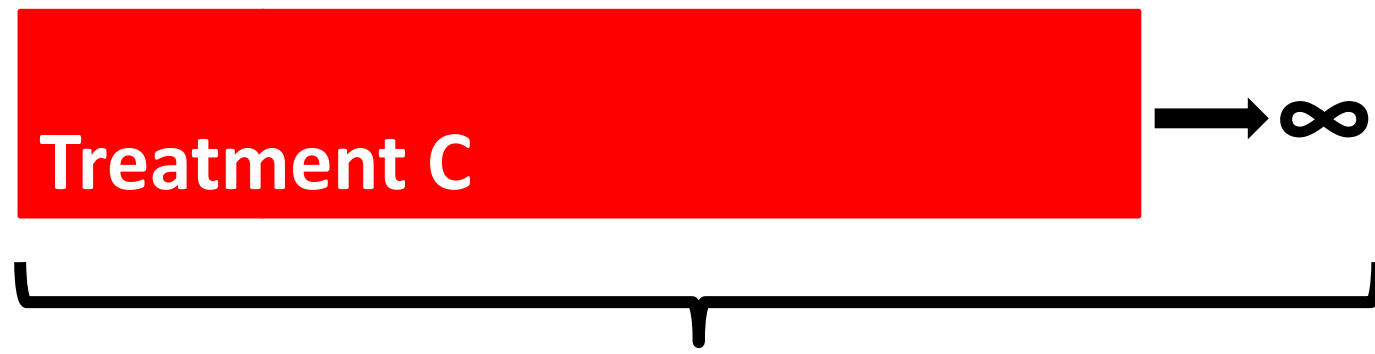
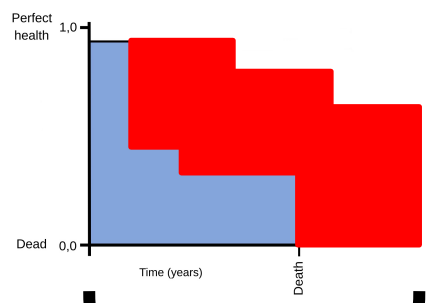
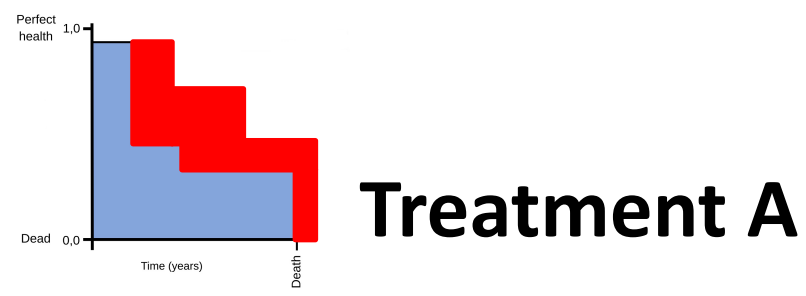
# U.S. Religiosity

- 70.6% of Americans are Christian
- 22.8% are unaffiliated
- Only 7.1% are avowed atheists or agnostics
- 88% believe in God
- 77% religion is important to them
- 71% pray at least weekly
- 35% read scripture at least once weekly



# Physicians Addressing Spirituality

- 91% - it is ok to address spiritual issues when the patient brings it up
- 45% - it is not ok for the physician to bring up spiritual issues
- 14% - it is never ok to talk about one's own religious beliefs w/ patients
- 53% - it is only ok to pray with a patient when the patient requests
- 17% - it is never ok to pray w/ patients



**Temporal**

**Eternal**

# Jesus' Example

“And Jesus went about all Galilee, **teaching** in their synagogues, **preaching** the gospel of the kingdom, and **healing** all kinds of sickness and all kinds of disease among the people.”

*- Matthew 4:23*

# Caring for the Soul and Body

“Christ has given us an example...He was the greatest physician the world ever knew, and yet He combined with His healing work the imparting of soul-saving truth.

And thus should our physicians labor. They are doing the Lord's work when they **labor as evangelists, giving instruction as to how the soul may be healed by the Lord Jesus.**

# Caring for the Soul and Body

Every physician should know how to **pray in faith for the sick**, as well as to **administer the proper treatment**. At the same time he should labor as one of God's ministers, to **teach repentance and conversion and the salvation of soul and body**. Such a combination of labor will broaden his experience and greatly enlarge his influence.

# Caring for the Soul and Body

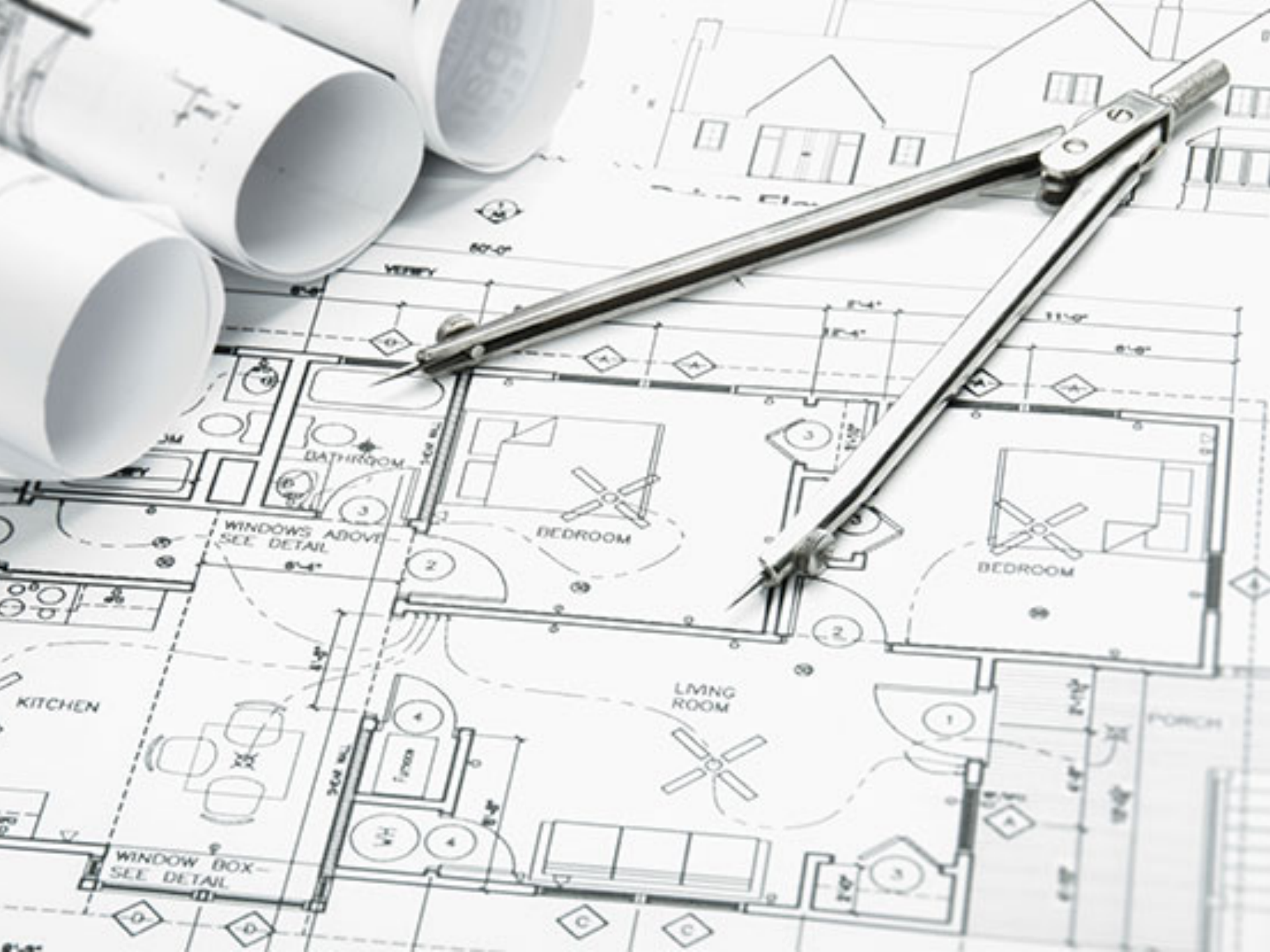
One thing I know: the greatest work of our physicians is to **get access to the people of the world in the right way**. There is a world perishing in sin, and who will take up the work in our cities? The greatest physician is the one who **walks in the footsteps of Jesus Christ.**”



# What is the Physician's First Work?

“The Redeemer expects our physicians to **make the saving of souls their first work**. If they will walk and work with God, in His love and fear, they will receive leaves from the tree of life to give to the suffering. His peace will go with them, making them messengers of peace.”





VEREY

8'-0"

8'-4"

11'-0"

8'-6"

BATHROOM

BEDROOM

BEDROOM

WINDOWS ABOVE  
SEE DETAIL

KITCHEN

LIVING ROOM

PORCH

WINDOW BOX -  
SEE DETAIL

2x4x8 HILL

WH

4

8'-4"

FOR

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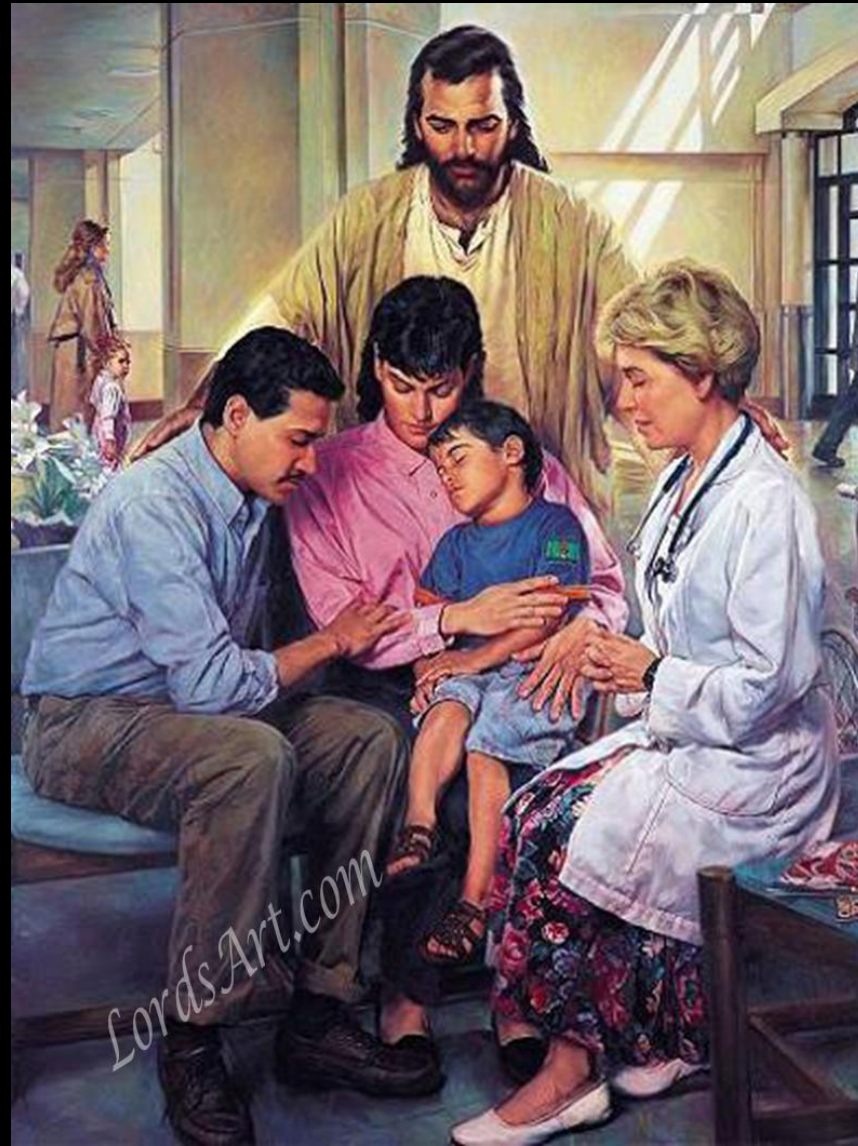
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# The Physician's Responsibility



# The Physician's Responsibility

“Every medical practitioner, whether he acknowledges it or not, is responsible for the souls as well as the bodies of his patients. The Lord expects of us much more than we often do for Him. Every physician should be a devoted, intelligent gospel medical missionary, familiar with Heaven's remedy for the sin-sick soul as well as with the science of healing bodily disease.

# The Physician's Responsibility

Coming as he does in daily contact with disease and death, **his mind should be filled with a knowledge of the Scriptures**, that from this treasure-house he may draw words of consolation and hope and drop them as good seed into hearts ready to receive them. He should **encourage the dying to trust in Christ** as the sin-pardoning Saviour, and should **prepare them to meet their Lord in peace**.

# The Physician's Responsibility

Physicians need a double portion of religion. Of men in any calling, physicians are most in need of clearness of mind, purity of spirit, and that faith which works by love and purifies the soul, that they may **make the right impression upon all who come within the sphere of their influence.** The physician should not only **give as much physical relief as possible** to those who are soon to lie in the grave, but he should also **relieve their burdened souls.**

# The Physician's Responsibility

**Present before them the uplifted Saviour.** Let them behold the Lamb of God, who taketh away the sin of the world. Those who understand the science of Christianity have a personal religious experience. He who acts as a guardian of the health of the body should **have tact to work for the salvation of the soul.** Until the Saviour is indeed the Saviour of his own soul, the physician will not know how to respond to the question, "What shall I do to be saved?" . . .

# A Remedy for the Sin-Sick Soul



# A Remedy for the Sin-Sick Soul

“Through the efforts of the Christian physician, the accumulated light of the past and the present is to produce its effect. Not only is the physician to **give instruction from the word of God**, line upon line, precept upon precept; he is to **moisten this instruction with his tears and make it strong with his prayers**, that souls may be saved from death...”



# Not Even the Minister



# Not Even the Minister

“The physician who ministers in the homes of the people, watching at the bedside of the sick, relieving their distress, bringing them back from the borders of the grave, speaking hope to the dying, wins a place in their confidence and affection, such as is granted to few others. **Not even to the minister of the gospel are committed possibilities so great or an influence so far-reaching.”**

# Signs of Poor Spiritual Health

- Frequent frustration
- Anger
- Bitterness
- Guilt
- Self-hatred
- Low self-value
- Jealousy
- Suspicion
- Addictions
- Anxiety
- Depression
- Self-pity
- Selfishness
- Discontent
- Impatience
- Hopelessness



# Signs of Good Spiritual Health

- Joyful
- Patient
- Content
- Hopeful
- Trusting
- At peace
- Connected
- Understanding
- Helpful



# A HOPE-full Approach to Spiritual Care

## Hope

- What gives you:
  - Hope?
  - Meaning in life?
  - Comfort in difficult situations?
  - Strength to press on?
  - Peace?
  - Love and connection?

# A HOPE-full Approach to Spiritual Care

## Organized Religion

- Do you belong to a faith group?
- How often do you attend religious services?
- Do you feel connected with the other members of your faith group?
- Does your religion positively impact your daily life? How?

# A HOPE-full Approach to Spiritual Care

## Personal Spirituality and Practices

- On a scale of 0-100, 0 being none, and 100 being the best it has ever been, how would you rate your relationship with God right now?
- What do you do to foster that relationship?  
(prayer, scripture, meditation, religious services, etc.)
- When was the last time that you were 100/100?
- What would it take to improve that number now?

# A HOPE-full Approach to Spiritual Care

## Effects on Medical Care

- How do your beliefs impact your health?
- Do your beliefs prevent you from accepting some forms of medical care (like blood transfusions, vaccinations, life support, etc.)?
- How would you like your spiritual needs addressed during your medical visits?



# Principles in Spiritual Care

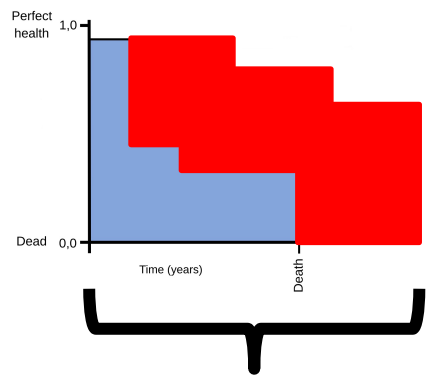
- Maintain an active devotional life yourself – you can't give what you don't have
- Ask the Lord to send you patients who need God and will be open to hearing about Him.
- Before and while you see a patient—pray
- Ask the patient, “Would it be helpful for you if I prayed with you before we begin?”

# Principles in Spiritual Care

- Look for the underlying reasons why the patients are sick and coming to you, it is most often an emotional or spiritual issue
- Ask questions to find out what is the underlying emotional/spiritual issues
- Address the underlying emotional/spiritual issues
- Be a conduit of God's love to them

Steve





**Temporal**



**Eternal**

# The Failure of Lifestyle

Mark Sandoval, M.D.

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HEALING FROM DISEASE, DEPRESSION,  
AND DAMAGED RELATIONSHIPS

# THE LAW OF *Life*

Michelle came to me with an abdominal cancer that had spread and was resisting all conventional attempts to control it. She also came with emotional baggage from relationship traumas. As I shared with her the principles contained in *The Law of Life*, and as she applied those principles in her life, her cancer reversed. She gained the joy and hope that she had lost, and she had a greater appreciation of her purpose in life. Michelle's story is not an isolated case. I see my patients' relationships restoring, spiritual lives blossoming, and mental health improving when these principles are applied. And you can too. Read and re-read *The Law of Life* until you understand and apply it to your life. You won't regret it!



MARK SANDOVAL after graduating from the Loma Linda University School of Medicine specialized in emergency medicine, practicing nationally and internationally. He transitioned to a lifestyle medicine practice at Uchee Pines Institute in 2012 and later became one of the first 200 physicians in the world to become board certified in lifestyle medicine. He is a proud father and happy husband, as well as an educator, entrepreneur, consultant, administrator, international speaker, and now author.



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THE LAW OF LIFE

Mark Sandoval, M.D.



# THE LAW OF *Life*



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