

## Practitioners: greater integration of lifestyle medicine into their medical practice helps manage, reduce burnout

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A research study published in the *American Journal of Health Promotion* found that the more that lifestyle medicine clinicians were able to



incorporate lifestyle medicine into their medical practices, the less likely they were to experience burnout.

Practicing more <u>lifestyle</u> medicine was associated with a 43% decrease in the chances of experiencing burnout in this 2019 <u>cross-sectional</u> <u>survey</u> of 482 members of the American College of Lifestyle Medicine (ACLM).

Additionally, 90% of respondents reported that lifestyle medicine positively impacted their professional satisfaction. Of these, 37% attributed that positive impact to feelings of accomplishment at seeing patients improve, 31% to increased patient satisfaction due to improved outcomes, and 21% to enjoyment of teaching and coaching leading to more personal clinician-patient relationships.

Burnout among health professionals is an urgent national problem, with an estimated 63% percent of health care professionals experiencing it in 2022, up from 44% in 2017. Some are leaving the already short-staffed medical profession because of it. The Association of American Medical Colleges projects a physician shortage of between 37,800 and 124,000 by 2034.

Lifestyle medicine is a <u>medical specialty</u> that uses therapeutic lifestyle interventions as a primary modality to treat chronic conditions including, but not limited to, cardiovascular diseases, type 2 diabetes, and obesity. Lifestyle medicine certified clinicians are trained to apply evidence-based, whole-person, prescriptive lifestyle change to treat and, when used intensively, often reverse such conditions. Applying the six pillars of lifestyle medicine—a whole-food, plant-predominant eating pattern, physical activity, restorative sleep, stress management, avoidance of risky substances and positive social connections—also provides effective prevention for these conditions.



Almost two-thirds of survey respondents were allopathic (MD) or osteopathic physicians (DO). Other respondents included registered nurses, registered dietitians, <u>physical therapists</u>, occupational therapists and doctors of nursing practice. Importantly, 28% of <u>respondents</u> reported no longer experiencing burn out. Of those, 84% attributed it to changing their work situation. Among those, 43% said the opportunity to better incorporate lifestyle medicine into their practice motivated their job change.

One respondent wrote that lifestyle medicine "is aligned with my purpose, so provides satisfaction. I get time with patients and can address emotional/spiritual issues in addition to physical complaints, thus addressing the whole person." Another respondent wrote that lifestyle medicine "practice has brought joy and meaning to my professional work."

Improved <u>self-care</u>, such as incorporating lifestyle behavior changes into their own lives, was also a top reason reported for reduced experiences of burnout. One respondent wrote "I also implemented my own lifestyle medicine changes—increased physical activity, switched to plant-based diet, managed stress better."

The study notes that attempts to reduce clinician burnout have traditionally focused on organizational changes related to staffing, paperwork or reduced rotations, but have produced only modest results. This is the first study to explore the experiences of burnout and, most importantly, reductions in burnout among lifestyle medicine clinicians. Future research should examine and compare the experiences of burnout among lifestyle medicine clinicians and similar groups of non-lifestyle medicine clinicians, the study stated.

Lifestyle medicine has also <u>been identified</u> as a potential strategy to inspire student doctors to choose a primary care specialty through an



increased focus on nutrition, <u>physical activity</u> and other lifestyle modifications in medical education. The shortage of primary care physicians is <u>projected</u> to grow to between 17,800 and 48,000 by 2034.

"The results of this research are highly encouraging because clinician burnout is a growing problem that can not only impact the clinician's sense of well-being but also the safety and quality of care that patients receive," said ACLM President Beth Frates, MD, FACLM, DipABLM, clinical assistant professor at Harvard Medical School. "It appears that a primary driver of burnout is a profound lack of satisfaction and joy in the lives of clinicians who are asked to manage patients with increasing numbers of chronic conditions through ever-increasing quantities of medications and procedures. Lifestyle medicine allows clinicians to connect on a deeper level with patients and address the root causes of disease to help them truly heal. And the opportunity to be true healers is why many clinicians choose to study medicine in the first place."

**More information:** Kathryn J. Pollard et al, Lifestyle Medicine Practitioners Implementing a Greater Proportion of Lifestyle Medicine Experience Less Burnout, *American Journal of Health Promotion* (2023). DOI: 10.1177/08901171231182875

## Provided by American College of Lifestyle Medicine

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