

Is the Reluctance to Adopt a Healthy Lifestyle Another “Elephant in the Room?”

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The “elephant in the room” is code for avoidance, or unawareness of an obvious issue. Preventing chronic illness by diet and lifestyle is such an issue. In the US diet is the leading cause of death and morbidity. Despite a plethora of reasons and evidence that a healthy diet and lifestyle prevents or reverses chronic disease, it is largely ignored. WHY? An overlooked reason may be the incubation period of chronic disease TAKES decades, during which an unhealthy lifestyle has few clinical consequences. Many diseases including cancer present so late that treatment options and survival are limited. Hence, prevention is wiser and safer. “Western Medicine” treats symptoms or disease primarily with medicine or surgery. “Lifestyle Medicine” is directed at cause, prevention and reversal, and emphasizes THAT a healthy diet, exercise, and stress relief to prevent, stabilize or reverse chronic disease. A whole food plant based diet (WFPBD) is the keystone to a healthy lifestyle.

The achievements in modern medicine are staggering. Despite all technical, operative and medical advances, including liberal testing and screening the outcome of many diseases is still limited. The USA is 12th of 38 Organization for Economic Cooperation and Development (OECD) countries in life expectancy (78.6 years) versus 81.1 - 84.2 years in the 11 leading countries. Worldwide life expectancy is increasing, while declining in the USA. The Commonwealth Funds evaluates health care in 11 major industrialized countries by analyzing four parameters: access, efficiency, equity and quality of care. Determinants of a healthy life were: preventable mortality, infant mortality and good health at age.

In these 3 areas the US ranked last, or next to last.

What kills so many and why do we lag in quality? Four chronic diseases account for 80% of deaths in the US. Once rare in most of the world, these illnesses are amongst our leading exports and are prevalent everywhere a western diet and lifestyle flourish. The four diseases are cardiovascular (cardiac, vascular, hypertension, strokes), diabetes, cancer and obesity/metabolic syndrome (obese, high triglycerides, hypertension, diabetic prone, and insulin resistance). Chronic diseases begin in the first decade of life and are manifest decades later. They are insidious, and asymptomatic for so long that a few extra pounds, slightly raised blood pressure, sugar and cholesterol and a sedentary lifestyle are minimized. Pills may reduce abnormal laboratory values but do not alter the cause or course of chronic disease. Chronic diseases once flourished only in affluent countries where processed foods, sugar, meat, dairy, cheese, poultry and fish, cake, and candy are the favored foods, but now involve most developing countries.

Diet aside, there are other causes of chronic disease. A leading cause is smoking tobacco which causes many health issues including CVD (cardiovascular disease) and cancer. Even today 8.1 million people die annually from smoking induced diseases, half of whom are younger than 70. Smoking has declined, especially in the USA, and mortality continues to decline years after smoking stops.

Obesity is a major risk factor for cardiovascular diseases, diabetes, several cancers and a shorter life expectancy. Seventy percent of adults are overweight and more than 1/3 are obese.

The death rate for diabetes is much higher in the United States than other countries. Acquired diabetes (Type 2) is due to insulin resistance which reverses with weight loss and a healthier lifestyle. The number of diabetics increase annually and its sequelae of cardiac, vascular, renal disease and cancers are best prevented.

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The cause of all chronic illness is chronic inflammation initiated by a faulty diet. Our natural defenses combat inflammation but assaulting immune defenses continuously (3 meals/day) plus snacks for 20+ years overwhelm immunity and facilitate chronic illness.

The evidence is clear that diet is the major cause of chronic disease. The World Health Organization estimates 80% of chronic diseases are prevented by 4 measures, a healthy diet, physical activities, no tobacco and modest alcohol consumption. Genes are invoked when successive generations or relatives develop similar health problems. The evidence is otherwise. Similar diets and lifestyle beget similar health issues. Until recently cardiac disease and cancer were rare in Japan and Africa. When Japanese and Africans settle in the US and adapt a western diet and lifestyle they develop chronic illness at the same rate as native Americans. Studies of gut flora (microbiome) show that adapting a western diet changes the gut flora to disease promoting bacteria.

Coronary artery disease (CAD) which accounts for most deaths worldwide (30%) is responsive to a WFPBD. Symptomatic patients who adhere to WFPB dietary changes have dramatic and lasting relief of cardiac symptoms and lesions. Esselstyn followed 189 symptomatic cardiovascular patients. 89% were diet compliant and 11% were not. 1 compliant patient had a stroke (0.6%), while 13/21 (62%) noncompliant patients had cardiac events. The cause of a myocardial infarct is injury to the endothelial cells of the coronary arteries, initiated by a diet of eggs, sugar, poultry, meat, dairy, fish, and processed foods. This is not a serendipitous event. The bacterial flora in the gut differ in vegans, vegetarians and carnivores. The microbiota in vegans act on undigested food and enzymatically produce nitric oxide. Nitric oxide is an ally and a vasodilator. In carnivores, meat (carnitine and lecithin) is digested by microbiota and oxidized to Tri Methyl Amine Oxide (TMAO) which promulgates vascular injury.

The mortality rate from CAD has been halved in Australia, the United Kingdom, and the US. In 1972, Finland had the highest mortality rate from cardiovascular disease in the world. A country wide effort of change included low fat dairy products, antismoking legislation, and improved school meals. Media and celebrities from business, education and sports were used to educate the population. After 5 years significant changes were noted in smoking, cholesterol and blood pressure. By 1992 the decline in CVD mortality for men aged 35 - 64 was 57%. The program was so successful that it extended to other chronic diseases and in 1998 a 79% reduction in mortality and morbidity was noted. Sudden death with a heart attack is not uncommon (20+%), or predictable, and is best avoided by a healthy lifestyle and cessation of smoking.

The benefits of diet and lifestyle are noted in other chronic diseases. No surprise that asthma, autoimmune diseases, cholelithiasis, rheumatoid arthritis, psoriasis, multiple sclerosis, inflammatory bowel disease, kidney disease and many cancers respond to diet and lifestyle change. They address the initiating cause, chronic inflammation.

A WFPBD including green leafy vegetables and fruit, avoidance of saturated and trans fats, alcohol, and tobacco smoking, chewing or vaping is important. Maintaining a healthy lifestyle is facilitated by daily physical activities, and limiting stress, TV watching, video games and unhealthy snacking. The decline in physical activity due to urbanization, the recent pandemic, working from home, and snacking undermines our best intentions.

Why is diet and lifestyle so frequently ignored? A bevy of reasons have been given to justify illness promoting behavior including, “some habits are difficult to break”, moderation is okay, family or religious traditions, a clean family history, and ads or misinformation from the food industry whose interest is sales, not health.

I believe there are other important reasons. Nutrition and lifestyle is not taught in 3/4 of medical schools, or residency. It is not a subject presented or discussed at most medical conferences and is not a subject covered at most physician patient visits. Patients who believe doctors should be role models for health are often disappointed by their physicians health, knowledge and interest about diet and lifestyle. The ongoing 70 year battle over smoking is now being waged on behalf of nutrition and lifestyle. Changing habits and lifestyle are not easy but beneficial and indisputable.

Conclusion

Chronic diseases are insidious and asymptomatic for decades. The underlying cause is chronic inflammation fed by an unhealthy diet and lifestyle. A whole food plant based diet (WFPBD) can effectively prevent, stabilize and reverse, chronic diseases. Health care costs are not sustainable in the US, life expectancy is decreasing, chronic diseases are increasing and many diseases present late in their course when treatments are limited. Rather than emphasize costly, ineffective treatment it is past time to recognize and embrace the elephant in the room, diet, lifestyle and disease prevention.

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