Integrative Medicine
from an
Occupational and Environmental Medicine
Perspective

Robert Eric Dinenberg, M.D., M.P.H.,
Chief Medical Officer, Viridian Health Management

DISCLOSURE INFORMATION

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Robert Eric Dinenberg, M.D., M.P.H.,
CMO, Viridian Health Management

*** I have the following financial relationships to disclose:
I have nothing to disclose

***I will not discuss off label use and/or investigational
use in my presentation
Today’s objectives

• Raise awareness about Integrative Medicine from an OEM perspective
• Provide examples of Integrative Medicine in the workplace
• Provide references and resources for further study

AGENDA

(1) Background – Integrative Medicine
(2) Background – Occupational Safety and Health + Worksite Health Promotion
(3) Examples – (1) Resiliency Program for San Mateo Medical Center (2) National Healthy Worksite Program
(4) Resources
(5) Questions, Comments, Discussion
Background – Integrative Medicine

According to the National Center for Complementary and Alternative Medicine, National Institutes of Health (NIH):

**Integrative Medicine** combines treatments from conventional medicine and Complementary and Alternative Medicine (CAM) Therapies for which there is some high-quality scientific evidence of safety and effectiveness.

**CAM** is a group of diverse medical and health care systems, practices, and products that are not presently considered part of conventional medicine.

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Background – Integrative Medicine

According to the National Center for Complementary and Alternative Medicine, National Institutes of Health (NIH):

**FIVE DOMAINS OF CAM:**

1. **Alternative Medical Systems** (example: Chinese Medicine)
2. **Mind-Body Interventions** (examples: yoga, meditation)
3. **Biological Based Therapies** (examples: supplements, herbs)
4. **Manipulative and Body-Based Methods** (example: massage)
5. **Energy Therapies** (examples: Qi gong, Reiki, healing touch)

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Background – Integrative Medicine

According to the Section on Integrative Medicine, Internal Medicine, University of New Mexico:

**CAM IS A SUBSET OF TOOLS WITHIN INTEGRATIVE MEDICINE**

INTEGRATIVE MEDICINE EMPHASIZES:

1. **WELLNESS AND HEALING OF THE WHOLE PERSON**
2. **PATIENT PARTICIPATION**
3. **ATTENTION TO MENTAL/SPIRITUAL WELL-BEING**
4. **COMMUNICATION/EMPOWERMENT/CULTURAL AWARENESS**
Background – Integrative Medicine

According to the Arizona Center for Integrative Medicine, University of Arizona:

INTEGRATIVE MEDICINE:
1. Is healing-oriented medicine that takes account of the whole person (body, mind, and spirit), including all aspects of lifestyle
2. Emphasizes the therapeutic relationship and makes use of all appropriate therapies, both conventional and alternative

Background – Integrative Medicine

The 2009 Summit on Integrative Medicine, Institute of Medicine concludes:

Integrative medicine envisions a health care system that focuses on efficient, evidence-based prevention, wellness, and patient-centered care that is personalized, predictive, preventive, and participatory.

Consortium of Academic Health Centers for Integrative Medicine, 51 members including:

- UCSF
- UCLA
- UC Irvine
- Mayo Clinic
- Harvard
- Stanford
- Yale
- Duke
- Columbia
- University of Pennsylvania
- University of New Mexico
- University of Arizona
Integrative Medicine:

- Reaffirms the importance of the relationship between practitioner and patient
- Focuses on the whole person
- Is informed by evidence
- Makes use of all appropriate therapeutic approaches, healthcare professionals and disciplines to achieve optimal health and healing

Background – Occupational Safety+Health

Occupational Safety and Health (OSH) defined:
OSH interventions are designed to minimize workers’ exposures to job-related risks including exposures to hazards:
- Physical
- Biological
- Chemical
- Ergonomic
- Psychosocial

Background – Workplace Health Promotion

Worksite Health Promotion (WHP) defined:
WHP interventions aim to promote healthy behaviors such as:
- Not using tobacco
- Weight control
- Healthy diet
- Physical activity
- Adherence to screening guidelines
Background – OSH/WHP Integration

In 1984 NIOSH concluded that OSH/WHP integration would:

“make possible a ‘synergism of prevention’ to improve the health of workers through comprehensive risk reduction”

Background OSH/WHP Integration

From the June 2011 ACOEM Guidance Statement: Workplace Health Protection and Promotion A New Pathway for a Healthier-and Safer-Workforce

“Government and private sector organizations and agencies should expand research on the synergy between health protection and health promotion in the workplace.”

Background

- 81 million Americans have cardiovascular disease (cost=$503 billion in 2010)
- 9.1 million had work-related injuries and illnesses in 2007 (cost=$250 billion in 2007)
- 1.3 million were diagnosed with cancer in 2005 (cost=$219 billion in 2007)
- 24 million have diabetes (cost=$174 billion in 2007)
- 67% of adults are overweight or obese (cost=$147 billion in 2008)
Background

In the U.S. in 2000:

- 18.1% of total deaths were attributed to TOBACCO USE
- 15.2% - POOR DIET + LACK OF PHYSICAL ACTIVITY

In the U.S. in 2006:

- Health care spending was more than $2 Trillion
- Employers on average paid more than 1/3 of this cost
- Workplace Health Promotion programs save (in medical cost reductions) about $3.37 for every dollar invested
  - AVG savings per employee per yr / AVG program cost per yr
  - Meta-analysis 32 studies each examined programs for AVG 3 years

Background

US Department of Health and Human Service’s Healthy People 2010 Report recommended:

- at least 75% of worksites offer a comprehensive worksite health promotion program

The most recent National Worksite Health Promotion Survey found:

- Only 7% of worksites offer comprehensive worksite health promotion programs

(Worksites with >750 employees were 6 times as likely to offer comprehensive worksite programs than those with 50-99 employees)

Background

Healthy People 2020 goals:

1) Increase the proportion of worksites that offer an employee health promotion program

2) Increase the proportion of employees who participate in employer-sponsored health promotion activities
Background

Comprehensive workplace health promotion program includes:

- Health education programs
- Supportive social and physical environment
- Integration of program into organizational structure
- Screening, including treatment and follow-up as needed
- Links to other assistance programs

Rationale

2 reasons for integrating OSH and WHP

1. Workers with highest job risk are also those most likely to engage in risk-related health behaviors

2. Integrating OSH and WHP may increase program participation and effectiveness for high-risk workers

Rationale (#1 - if high job risk then high life risk)

- Exposure to both job and life risks are concentrated among those employed in blue-collar occupations
- Blue collar workers exposed to hazards on the job are more likely to smoke than unexposed counterparts
- Increased exposure to hazards on the job has been linked with unhealthy dietary habits and binge drinking among blue collar workers
- One study finds high job risk + high life risk = 3 additional absence days/year and 5x as much psychological distress (depression, anxiety) than workers in low risk group
Rationale (#2 – participation and effectiveness)

Evidence from risk communication field demonstrates that people place highest priority on risks that are:

- Involuntary
- Outside personal control
- Undetectable
- Seem unfair

(Features often found in occupational hazards)

Rationale (#2 – participation and effectiveness)

Workers may perceive job risk reduction efforts to be more important than personal health behavior changes.

Skepticism about management’s commitment to improve worker health may reduce workers’ interest in participating in health promotion programs at work.

Employer efforts to create a safe and healthy work environment may enhance workers’ receptivity to life risk reduction efforts.

Rationale (#2 – participation and effectiveness)

Blue-collar workers who reported that their employers reduced hazardous exposures on the job were significantly more likely to have participated in smoking cessation and nutrition programs than workers not reporting management changes.
Rationale (#2 – participation and effectiveness)

A randomized controlled study asked the question:

"Does the addition of worksite occupational safety and health increase the effectiveness of worksite promotion only?"

>15 mid to large size manufacturing worksites randomly assigned to receive either (WHP only) or (WHP+OSH)

RESULTS:

Smoking quit rates (6 month) among blue collar workers in the (WHP+OSH) group more than doubled relative to those in the (WHP only) group.

Case Study: San Mateo Medical Center

Organization Profile

San Mateo Medical Center
- 509 Bed Public Hospital
- 15 Clinics
- Long Term Care

The Measures and Facilitator

- Maslach Burnout Inventory – Emotional Exhaustion Scale
- Gratitude Questionnaire (GQ-6) - Emmons, R. A
- Five-Facet Mindfulness Questionnaire - Observe and Non-React Factors

R. Eric Dinenberg, MD, MPH
Chief Medical Officer
Viridian Health Management

Prevalence of Burnout and Stress

- Up to 60% of physicians report symptoms of burnout
- 50% 3rd yr med students report burnout**
- 40% of hospital nurses have increased levels of burnout***
- 26% of nurses who leave the field report stress as the cause****
- 57% of nurses reported stress****

*JAMA 2002;288(12):1447-1450
***JAMA 2004; 286(11): 1497-1502
****Nursing Economics 2006; 24(1): 25-30; Carol Reineck, Antonio Furino; Nursing Career Fulfillment: Statistics and Statements From Registered Nurses
Elements of Resiliency Programs

1. Mindfulness
2. Self-Awareness
3. The Practice of Gratitude
4. Social Support

1. Self-regulation
2. Intentionality
3. Self-validation
4. Social Support
5. Self-care

Source: BJC Compassion Fatigue
Innovation Showcase, ExperiaHealth
CXO Roundtable, April 25, 2012

1. Fostering acceptance
2. Finding meaning in life
3. Gratitude
4. Spirituality
5. Retraining your attention

Source: http://www.mayoclinic.org/resilience-training/

Mindfulness

“The quality of being fully present and attentive in the moment during everyday interactions.”

Five Steps to Mindfulness

1. Regroup
2. Release
3. Reconnect
4. Refresh
5. Rebalance

Mindfulness

1. Regroup present moment focus
2. Release let go of attachments
3. Reconnect gratitude
4. Refresh beginner’s mind
5. Rebalance remove judgments

Source: ExperiaHealth

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On 10/2011, the CDC launched the National Healthy Worksite Program (NHWP).

NHWP is designed to assist employers in implementing prevention and wellness strategies to reduce chronic disease rates. Viridian Health Management is the NHWP’s national implementation partner.

National Healthy Worksite Program

Viridian Health Management assists up to 100 companies in 7 counties across the U.S.

7 counties selected by:

- Health outcomes and behaviors below state averages
- Available community resources
- High health disparities, urban/rural localities, industry sector diversity, demographic diversity

7 counties selected:

1. Kern County, California
2. Pierce County, Washington
3. Harris County, Texas
4. Buchanan County, Missouri
5. Shelby County, Tennessee
6. Marion County, Indiana
7. Somerset County, Maine

- Viridian Health Management provides operational management of the health promotion program and coordinates activities among NHWP participants.
- Viridian Health Management conducts individual and organizational assessments, program planning, implementation support, and data collection.
- Brenda Schmidt, President and CEO, Viridian Health Management employs two central strategies:
  1. Create a healthy culture across the organization
  2. Identify and reduce individual and population health risks through data collection and health coaching.
Health coaches help patients build the knowledge, skills, and confidence they need to reach their own health goals.

The aim of health coaching is patient activation, and increased patient activation has been related to positive change in behaviors relevant to chronic disease.

Health coaches also provide emotional support and assistance needed by patients with chronic diseases.

Trust building and a non-judgmental approach is the basis for a therapeutic relationship that helps a patient discover their own motivation for healthy change.

To cultivate a non-judgmental approach, and to give a health coach another tool for stress management, NHWP Health Coaches are trained in mindfulness – an integrative approach.

Health Protection + Health Promotion Resources

NIOSH
Total Worker Health
www.cdc.gov/NIOSH/TWH/

Funded 4 Centers of Excellence:
1) Center for the Promotion of Health in the New England Workplace (CPH-NEW) a collaborative of University of Massachusetts and University of Connecticut
2) Harvard School of Public Health Center for Work, Health, and Well-being
3) University of Iowa Healthier Workforce Center for Excellence
4) Oregon Healthy Workforce Center

Resources

Center for the Promotion of Health in the New England Workplace (CPH-NEW)

Example of research:
Health Protection (ergonomics)

Health Promotion (wellness program focuses on weight)

Following:
• Absenteeism
• Ergonomic hazards
• Workmen’s compensation claims
• Self-reported musculoskeletal discomfort
• General Health
Resources

Harvard School of Public Health Center for Work, Health, and Well-being

A collaboration between:

• Harvard School of Public Health
• Dana-Farber Cancer Institute
• Partners Health Care, Inc.
• Boston University School of Public Health
• Laborers' Health and Safety Fund of North America
• Massachusetts Department of Public Health

Integrative Medicine Resources

• National Center for Complementary and Alternative Medicine:
  http://nccam.nih.gov
• Arizona Center for Integrative Medicine:
  www.integrativemedicine.arizona.edu
• Consortium of Academic Health Centers for Integrative Medicine:
  www.imconsortium.org
• The Bravewell Collaborative (Transforming Health Care and Improving the Health of the Public through Integrative Medicine:
  www.bravewell.org

Resources from Examples

• ExperiaHealth (Improving the Human Experience in Healthcare):
  www.experiahealth.com
• National Healthy Worksite Program:
  www.CDC.gov/NationalHealthyWorksite/
  NHWP "Program News" Example: Webinar: Mental Health and Chronic Disease in the Workforce, Oct. 10, 1-2:00 p.m. EDT
• Viridian Health Management:
  www.viridianhealth.com
My contact information

Robert Eric Dinenberg, M.D., M.P.H.
Chief Medical Officer, Viridian Health Management

"Eric"
Email: edinenberg@viridianhealth.com

Please use "WOEMA 2012" in the subject of your emails

THANK YOU!

Questions, Comments?

References

- Centers for Disease Control and Prevention. Chronic disease prevention and health promotion
- National Program of Cancer Registries. National program of cancer registries: facts

References


