

From Sick Care to Self-Care: Transforming People and Systems Through Lifestyle Medicine

South Dakota Medical Society

May 29, 2026

**Michelle Thompson, DO, AOBFP,
ABOIM, DipABLM, FACLM**

- **Vice President of Medical Staff UPMC Horizon & Jameson**
- **Board Certified Integrative & Lifestyle Family Medicine**
- **Mind-Body Medicine Certified**
- **Medical Director UPMC Lifestyle Medicine Program**
- **Physician Thrive Champion and Well-Being Committee**
- **Associate Professor of Family Medicine University of Pittsburgh School of Medicine**
- **Adjunct Clinical Professor Philadelphia and Lake Erie College of Osteopathic Medicine**



5/27/2026

Know Your Resources

Wholehearted Medicine

UPMC
LIFE CHANGING MEDICINE



[About](#) [Services](#) [Meditations](#) [Consulting](#) [Testimonials](#) [Contact](#) [Schedule](#) [Resources](#)

LIVE. LIFE. WELL.

PERSONALIZED MEDICINE
AS A WAY OF LIFE





**Dr. Michelle Thompson DO,
AOBFP, ABOIM, DipABLM, FACLM**

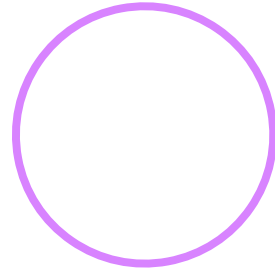
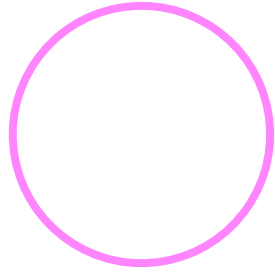
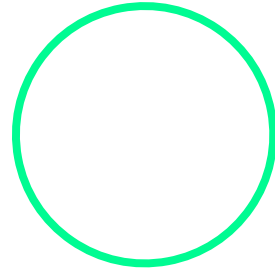
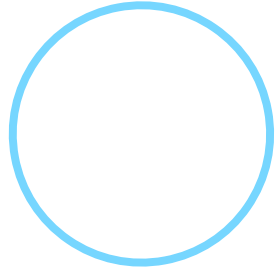
does not have any relevant financial relationships with ineligible companies to disclose in relation to this activity.

Michelle Thompson DO, AOBFP, ABOIM, DipABLM, FACLM
Medical Director UPMC Lifestyle Medicine



- 1992** Changed own diet & lifestyle
- 1998** Nutrition Great Lakes Institute Technology Integrative Journey, Director of Massage
- 1996-2003** LECOM
- 2003-2006** UPMC Mercy Family Medicine Residency
- 2006** Reversing Diabetes lecture, health coaching, disease reversal
- 2011** Cleveland Clinic, Dr. Esselstyn WFPB program
- 2016** Dietitian added to Family Medicine practice
- 2016** Community Events: Health Living Series, moving away from bick-and-mortar
- 2016** Launched digital space with Be Well Therapies, LLC offering resources including Shop with a Doc teaching video
- 2017** Physician Wellness & Docs in the Kitchen
- 2018** Nutrigenomics, Pharmacogenomics, Mind-Body Medicine
- 2019** Culinary, Medicine, Mindful Medicine, Yoga Medicine, launched Wholehearted Medicine, LLC
- 2020** Pandemic Grant Work: Mobile Teaching Kitchen, Virtual Dr. Yum
- 2021** Certified in Mind-Body Medicine with CMBM
- 2022** Medical Director of UPMC Lifestyle Medicine
- 2024** Physician Coaching Certification
- 2025** ACLM Board or Directors





Let's take a breath



SECOND OPINION

BY ROB ROGERS





She packed up her potent
and all she had learned,
Grabbed a Cute pair of s
and headed out to
change a few things



"Every patient deserves to know when LIFESTYLE CHANGE is a viable option to address the root cause of their disease."

ACLM PRESIDENT DR. PADMAJA PATEL



Our Lifestyle Medicine Mission and Values



Vision: We empower people on the journey to whole health

Mission: By using evidence-based programs and recommendations, we serve and fulfill potential through lifestyle change.

We Value:

- Leading systems in service and justice for the poor and underserved
- Championing non-biased, evidence-based approaches to disease prevention, treatment and reversal.
- Collaborative partnerships for promoting lifestyle medicine in the interest of public health
- Restoring whole health in health care
- Establishing virtual and physical environments that promote whole health

UPMC Lifestyle Medicine Milestones

- Health coaching curriculum development 2009-2012
- Employer Health and Productivity Roadmap Strategy 2012
- Complete Health Improvement Program (CHIP) pilot 2014
- UPMC “Lifestyle Medicine Conversation” leadership summit 2015
- “Prescription for Wellness” development and deployment 2015
- Lifestyle Medicine & Environmental Health Grand Rounds 2017
- Lifestyle Medicine Physician Group 2018



UPMC Lifestyle Medicine Milestones

- Full Health Program UPMC Enterprise 2018
- Physician's Well-being Symposium 2018
- Hospital Food changes 2018
- Abridge to help with charting 2018
- AIH-Pitt Lifestyle Medicine Research Summit 2019
- National CHIP employer offering 2020
- LMRC available in 8 Family Medicine Residency programs 2020

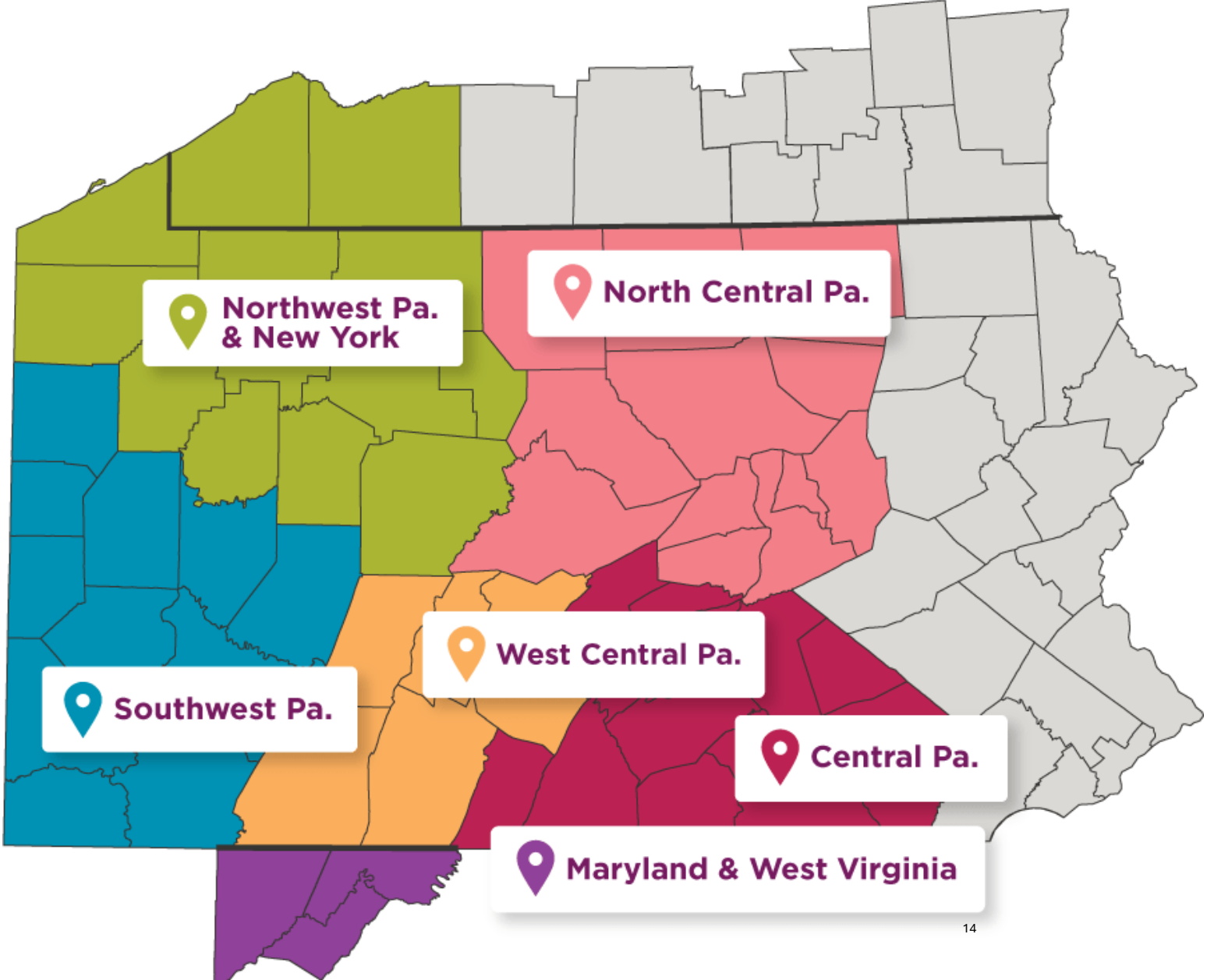


UPMC Lifestyle Medicine Milestones



- LMRC for Internal Medicine Residency UPMC Pinnacle 2022
- Lifestyle Medicine Interest Group (86 members) 2022
- Group Medical visits 2022
- UPMC Lifestyle Village 2022

UPMC footprint



UPMC footprint

- UPMC's footprint includes over 40 hospitals and 800 outpatient sites in Pennsylvania, New York, and Maryland, with its headquarters in Pittsburgh, PA. The organization also has a global presence, with facilities and partnerships in Italy, Ireland, and Croatia, and provides healthcare services to communities in the United States and abroad
- **Europe:**
- UPMC has an international presence in three countries: **Italy, Ireland, Croatia**
- **Services:**
- In these international locations, UPMC tailors its clinical programs to meet the needs of the global community while adhering to high standards of care.
- Overall Scope:
- With over 100,000 employees and more than 6,000 physicians, UPMC provides comprehensive care across a network of hospitals and outpatient sites.
- The organization is a fully integrated healthcare system that combines patient care, insurance services, and research to deliver world-class medicine.



UPMC Hospital System



- | | |
|---|---------------------------------------|
| 1. UPMC Altoona | 18. UPMC Magee-Womens Hospital |
| 2. UPMC Bedford | 19. UPMC McKeesport |
| 3. UPMC Carlisle | 20. UPMC Memorial |
| 4. UPMC Chautauqua | 21. UPMC Mercy |
| 5. UPMC Children's Hospital of Pittsburgh | 22. UPMC Montefiore |
| 6. UPMC Cole | 23. UPMC Muncy |
| 7. UPMC Community Osteopathic | 24. UPMC Northwest |
| 8. UPMC East | 25. UPMC Passavant |
| 9. UPMC Hamot | 26. UPMC Passavant Cranberry |
| 10. UPMC Hanover | 27. UPMC Presbyterian |
| 11. UPMC Harrisburg | 28. UPMC Shadyside |
| 12. UPMC Horizon Greenville | 29. UPMC Somerset |
| 13. UPMC Horizon Shenango | 30. UPMC St. Margaret |
| 14. UPMC Jameson | 31. UPMC Wellsboro |
| 15. UPMC Kane | 32. UPMC Western Maryland |
| 16. UPMC Litz | 33. UPMC Western Psychiatric Hospital |
| 17. UPMC Lock Haven | 34. UPMC West Shore |
| | 35. UPMC Williamsport |

For more information, go to UPMC.com.

National leader in offering
comprehensive Lifestyle Medicine
services & group medical visits.

UPMC
LIFE CHANGING MEDICINE

UPMC

Lifestyle Medicine

- Member of ACLM Health Systems Council
- Lifestyle Medicine Residency Curriculum
- University of Pittsburgh School of Medicine in curriculum & elective rotations 2 or 4 weeks
- Lifestyle Medicine Interest Group
- Lifestyle Medicine Residency Curriculum
- Lifestyle Medicine Department
- 50+ ABLM providers in multiple specialties



UPMC Life Changing Medicine



Lifestyle Medicine



Mind-Body Medicine



Integrative Medicine

Start with SELF

Create your OWN
Lifestyle Medicine
Prescription

DATE: _____
PATIENT NAME: _____
ADDRESS: _____

Take care of yourself

MD: _____
SIGNATURE: _____

Important to tap into your body and begin to listen



We learned to push through despite how it made us feel



In our training if we didn't want to stand, we stood anyway



If we didn't want to sit, we sat anyway



If we didn't have time to eat, we starved or inhaled our food when we had the opportunity



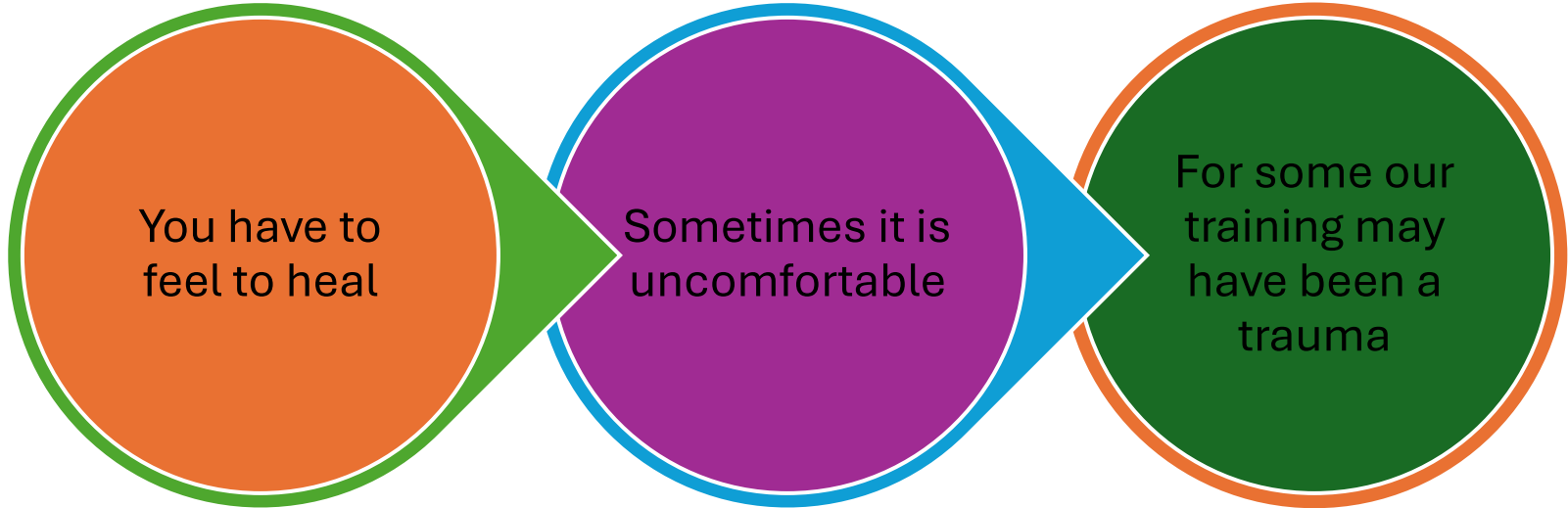
Sleep deprivation



Listen to your breath



As long as we have our breath we are capable of making changes



You have to
feel to heal

Sometimes it is
uncomfortable

For some our
training may
have been a
trauma

SELF CARE



We need to start with ourselves. Create our OWN Prescription for Wellness

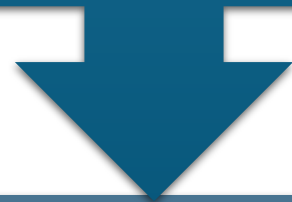


I tell my patients “I cannot care more about your health than you do”-



We cannot care more about our patients or the people we care for than ourselves!

We all have the power to make a positive change.



Thank you for showing up. This time is 100% for you. You do not have to participate in anything that does not resonate with you, however be open-minded enough to consider trying some new things.

Today I hope to give you a bit of a break - some peace - some awareness - maybe show you a different path in life that can help you to live happier and be healthier.

Healers often times over do it – we are killing ourselves in efforts to help others. We must make time to nurture ourselves like we nurture others



Find calmness in our mind – like an ocean, if turbulence, you cannot see or have clarity. If ocean becomes calm, you can see all the way to the bottom and the treasures that lie within.



Space to breathe and to just be.

- Periods where we are a human being and not a human doing.

So the Energizer Bunny, the battery runs out and it stops – NOT US – we keep pushing. We often work long shifts, sleep deprivation, lack of proper diet and exercise We must change this

- Doctors are human. We require emotional support to thrive in medicine. The culture of medical education has too often pitted us against one another in an environment in which your success depends on crushing your competition. What if we interacted as human beings first? I invite you to embrace each other as brothers and sisters in medicine.

COVID-19 Pandemic exposed the fractures in Healthcare

- Global trauma revealed self-care is imperative.
- Human beings have basic needs rooted in Lifestyle Medicine.



TRAUMA-INFORMED CARE:

What does it look like?

@therecoverycenterusa



Language and Communication

Helpers use non-judgmental and empathetic language. They avoid making assumptions about an individual's past experiences. For instance, instead of asking, "What's wrong with you?" they might ask, "What happened to you?"



Providing Choices

In healthcare settings, offering choices to patients can be empowering. For example, allowing a patient to choose their meal preferences or the time of their therapy sessions gives them a sense of control.



Sensory-Friendly Environments

Recognizing that sensory sensitivities can be triggered by trauma, trauma-informed care might involve providing calming sensory rooms or ensuring that lighting and noise levels are adjustable to individual preferences.



Active Listening

Helpers actively listen to individuals without interrupting or rushing through appointments. They validate their feelings and experiences.



Training and Self-Care

Healthcare staff are trained in trauma-informed care principles and are encouraged to practice self-care to prevent burnout. This ensures that they can provide the best possible care to their patients.



De-escalation Techniques

In situations where patients may become agitated or distressed, trauma-informed care involves de-escalation techniques that prioritize safety and minimize re-traumatization.

What frameworks currently exist?

-Dr. Sarah Berman & Dr. Taylor Brown

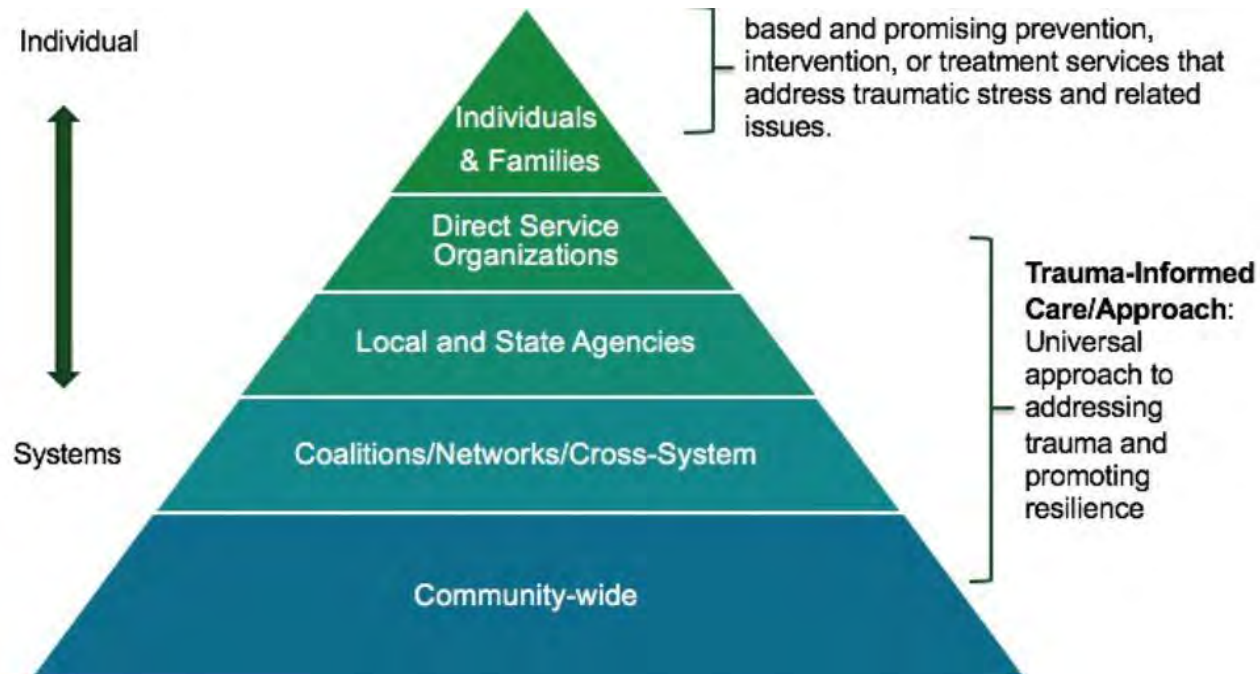
-Substance Use and Mental Health Services Administration - 6 domains of trauma-informed care (TIC): safety, trust, and transparency; peer support; collaboration and mutuality; empowerment, voice, and choice; and cultural, historic, and gender issues

-Used TIC domains to develop trauma informed medical education (TIME) framework - 2023



What frameworks currently exist?

- TIME includes different areas - knowledge for practice, patient care, practice-based learning and improvement, interpersonal & communication skills, professionalism, systems-based practice, interprofessional collaboration, personal and professional development
- Learning objectives for each area in medical education
- Have also created a series of modules to educate faculty about how to teach the TIME framework





All those tools and techniques that we can use to understand and better know ourselves mentally and physiologically



Do not forget this:
You are the most beautiful and
expensive thing you're ever going to
own

What does
self-care look
like?





What Does Self-Care Look Like?

Drink water – The body is mostly water. Focus on slowly working up to half your body weight in ounces (**SLOWLY**)

Bring your favorite snack – Plan ahead & prep. Whether you know your day is going to be long with limited breaks or not, it is helpful to create a habit of having quick grab-and-go healthy snacks.

Exercise – ANY amount matters. Physical activity is different than exercise. Do your best and aim for 20-30 minutes a day of what you can do.

Think RAINBOW: Wear one of your favorites & eat your colors – A favorite shirt, shoes, socks, or even your favorite accessory can make a difference. Wear it. Change up your colors on your body and your plate. Varied colors in food bring a variety of nutrients.

What Does Self-Care Look Like?

Journal – Express your emotions: leave it on paper, and then move forward.

Take a time-out– Make time to regroup and reconnect with YOU. If you can't commit to a solo moment, schedule regular time with friends or family to socially step outside yourself.

Speak positively to and about yourself – Increase your awareness of your word choices. Pause and rephrase when you can. Change your inner and outer voice. Treat yourself like you would your best friend.

Solutions-only problem solving– Take time to re-think your actions if you are repeating habits you want to change. Always running late? Book time in your calendar to address the situation and work on action-steps for positive solutions. No more procrastination.



- Disconnecting digitally for 2 or more hours
- Silent eating for a meal
- Schedule a movie night with yourself
- Read, journal, cook: consider doing something different and out-of-the-ordinary
- Find what brings you joy
- If you find you cannot fit in any or enough self-care steps every day, then make sure to set aside a day or two for yourself each month.
 - Take yourself on a movie date, shut off all electronics for a day, read something for fun, cook for yourself.
 - Find something you enjoy that provides satisfaction and do it.
 - Taking care of yourself means you will be able to continue taking care of everything, and everyone else you encounter each day.
- REMEMBER
 - Self-care will look and feel differently for everyone.
 - Find 2-3 things for you, so you can handle our crazy industry a little bit better every day.

Setting boundaries

Leave

Leave work at work.

Come

Come all the way home.

Change hats

Take off your work hat/primary role hat unless necessary

Leave

Certain things behind...work items can be left in work-spaces & not intermingled with home/personal space.

Do not let

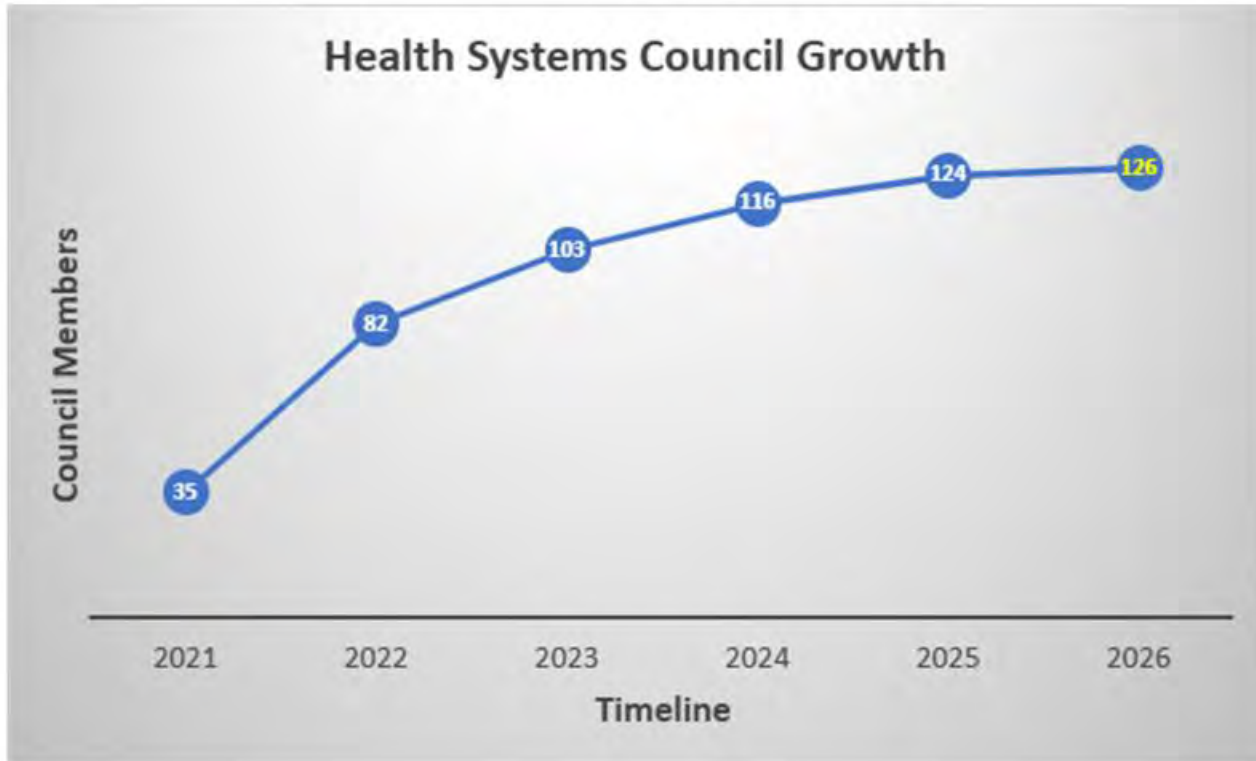
Do not let your identity be completely wrapped up in your occupation

Learn

Learn to be present-just a human being and not a human doing.



AMERICAN COLLEGE OF
Lifestyle Medicine
HEALTH SYSTEMS COUNCIL



* map represents headquarter location of member health systems.

Training Our Future Doctors

- Medical Students have an elective at UPSOM, LECOM, PCOM for Lifestyle or Integrative Medicine
- Lifestyle Medicine Residency Track for FM, IM, PM&R, PEDS



Journal of General Internal Medicine

- ▶ Revisiting the Time Needed to Provide Adult Primary Care
 - ▶ <https://www.aafp.org/pubs/fpm/blogs/inpractice/entry/time-study.html>
- ▶ Doctors need 27 hours per day to do their work
 - ▶ <https://link.springer.com/article/10.1007/s11606-022-07707-x>
- ▶ Physicians practicing LM are happier and healthier
 - ▶ <https://journals.sagepub.com/doi/10.1177/08901171231182875>





Doctors in the Kitchen Food as Medicine

Hospitalists



Phipps



Journal Club

Thyme in Your Kitchen

medical student, interns, residents, & attendings



Community Teaching Kitchens

Be Well Therapies &
Prepped Wellness



Dr. Yum

We were able to place kits in:

- ❖ Mercer County, PA
- ❖ Lawrence County, PA
- ❖ Trumbull County, OH



Located in Sharon, PA



Tender Care Learning Center
New Castle, PA



Kinsman Head Start
Kinsman, OH



Mercer County Head Start
(Main Office)



Hartford Head Start
Fowler, OH



Community Access






Build it



Pop Up Teaching Kitchen

Everything we should ideally strive to fit into our daily routine for optimal health and longevity.

 **BEANS** ✓✓✓
Servings: 3 per day
ex: 130g cooked beans, 60g hummus

 **FRUITS** ✓✓✓
Servings: 3 per day
ex: 1 medium fruit, 40g dried fruit

 **GREENS** ✓✓
Servings: 2 per day
ex: 60g raw, 90g cooked

 **FLAXSEED** ✓
Servings: 1 per day
ex: 1 tablespoon ground


 **GRAINS** ✓✓✓
Servings: 3 per day
ex: 100g hot cereal, 1 slice of bread

 **EXERCISE** ✓
Once per day
ex: 90 min. moderate or 40 min. vigorous

✓ **BERRIES** 
Servings: 1 per day
ex: 60g fresh or frozen, 40g dried

✓ **CRUCIFEROUS** 
Servings: 1 per day
ex: 30-80g chopped, 1 tbs horseradish

✓✓ **VEGETABLES** 
Servings: 2 per day
ex: 50g nonleafy vegetables

✓ **NUTS** 
Servings: 1 per day
ex: 30g nuts, 2 tbs nut butter

✓ **SPICES** 
Servings: 1 per day
ex: ¼ teaspoon turmeric

✓✓✓ **BEVERAGES** 
Servings: 1750ml per day
ex: water, green tea, hibiscus tea

Daily Dozen

Download Dr. Greger's Daily Dozen app and start tracking



New Training Models of Care to Expand Access to Lifestyle Medicine Education



Virtual Rotations with Residents and Students



The future: UPMC Lifestyle Village



**3 floors dedicated to
Healthy Lifestyle**



UPMC Lifestyle Village

UPMC Lifestyle Village

- Private spaces, natural light, art, workspaces.
- Open and airy for joyful connection
- Praise spaces for difficult positions.



Level 1 – Family Services

- Spaces for families and visitors.
- Family lounge for long term patients.



Fireplace

Glass Wall System

Kitchenette

Level C2 – Education Center



Group Meeting



Classroom Training

Meeting spaces for
community classes
and activities

Level C3 – Fitness Center

Yoga classes in the garden and inside
Green spaces
Meditation rooms



Yoga



Treadmill and Elliptical



Storage

New hospital room design

- Couch for family
- Workspace for family
- More natural light



Nutrition Update at UPMC

- Chefs, Dietitians and their teams created thousands of WFPB recipes in 2 of the biggest city hospitals supporting 14 outlying hospitals by preparing and delivering food to them.



Nutrition Update at UPMC

Grant funded Pilot program:

“The success of the patient is driven by the support of the family”

Goal: provide patients’ families with free WFPB meals in the cafeteria prescribed by doctors.

People in the cafeteria can help the family members learn which foods are better for the family.

Patients’ families are educated and actively involved.



Nutrition Update at UPMC

- Vegan Grab and Go items
- Vegan soups for the week
- Bright Bowl Concept
- Specialty options
- Veggie burgers (not processed)
- No deep-fried food for sale in the hospitals in the future.



Nutrition Update at UPMC

Weekly healthy meals and snacks
cooking class on YouTube for cancer
patients.

UPMC Food Pharmacy

East and West Pittsburgh.

The goal is to teach and provide for
families in food insecurity areas.



Obesity Initiative

- UPMC Health Plan and Health Service Division.
- Medical Management of Obesity and understanding the role for medication along with lifestyle approaches



Environmental Update at UPMC

- Revamping the Green Department
- Project Green Health for health care organizations
- White house pledge reduce gas house emissions for 50% and net neutral by 2050
- Recycle Programs in the hospital
- RoadRunner partner in all hospitals:
 - Food waste taken away composted off site and returned for our gardens and flower beds





- Offering it to UPMC Health Plan members , City of Pittsburgh and University of Pittsburgh
- 1st Pitt Pivio class finished and is collecting data outcome metrics.
- A class of 10 collectively lost 121.5 POUNDS!
- Great improvement in their lab outcomes

In the near future: implement this into Family Medicine and Internal Medicine LMRC program

My Health at Work for UPMC employees

Integrative holistic patient centered approach in all our clinics

Our Goal: Redefine primary care so that we can recruit, attract, and retain providers who are good at primary care.

We are supporting these providers by addressing all of their stressors and needs FIRST.

Health Plan is supporting employees communities, sponsoring current champions and community-lead programs.



What is Mind-Body Medicine

Mind-body practices focus on the interactions of mind, body, and behavior, with the intent to use the mind to affect physical functioning and promote health.

– National Center for Complementary and Alternative Medicine

“MBM is the understanding of the complete interpenetration of mind and body and the possibility that all their aspects can speak with one another and can promote healing”.

Dr. James Gordon



MBM is about taking care of ourselves and sharing with others

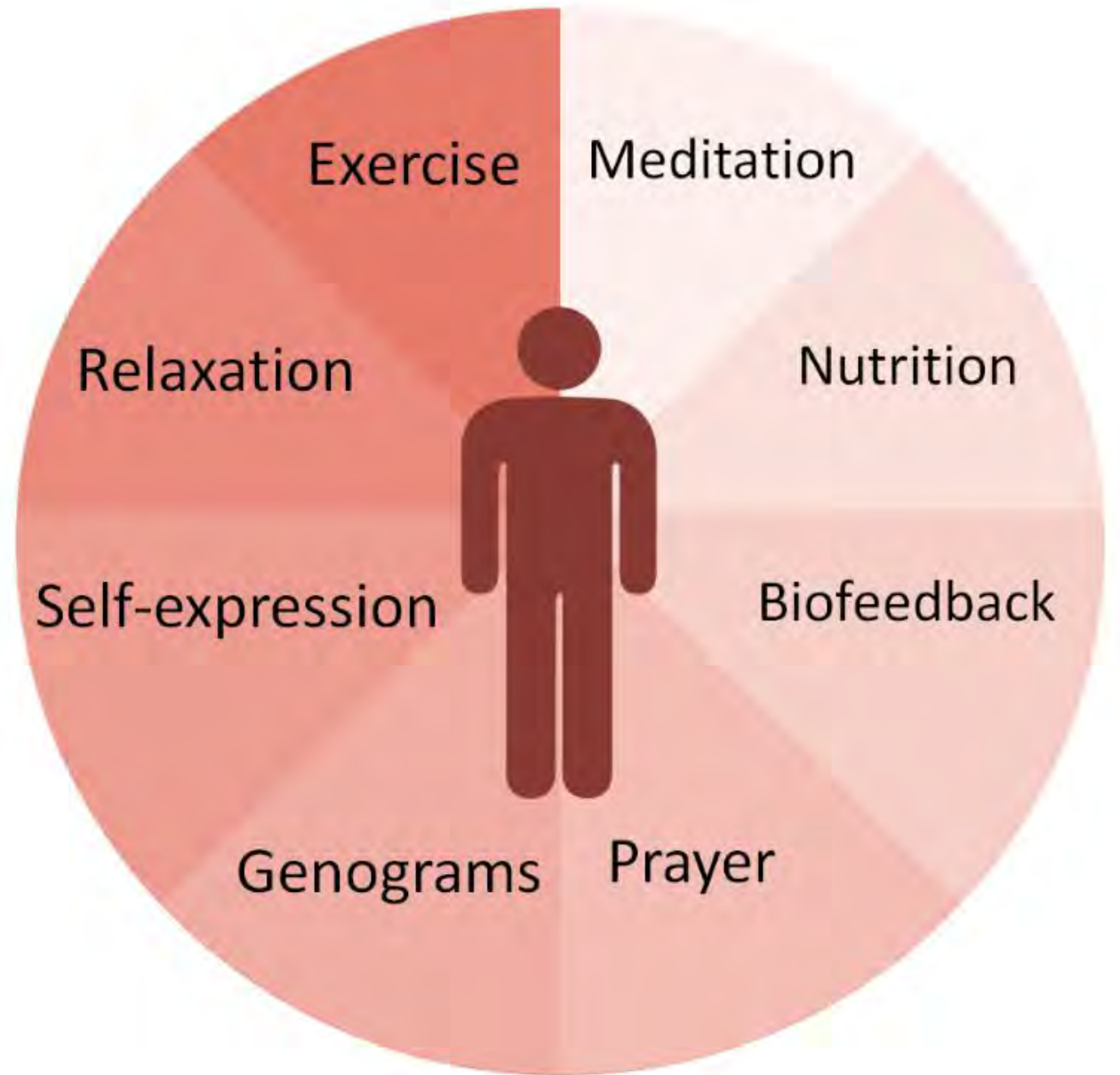
8-12 week program

One 2h session per week.

Robust evidence in different populations.



The Center for
**Mind-Body
Medicine**



Honor your Emotions

Labeling emotions decrease their intensity and limbic system activity, contributing significantly to emotional regulation.

If you don't acknowledge your own pain it is less probable that you will be able to have empathic resonance with the pain of others including patients
(Compassion Fatigue)



Lieberman M. D., Eisenberger N. I., Crockett M. J., Tom S. M., Pfeifer J. H., Way B. M. (2007). Putting feelings into words: affect labeling disrupts amygdala activity in response to affective stimuli. *Psychol. Sci.* 18, 421–428

UPMC Lifestyle Medicine

UPMC
LIFE CHANGING MEDICINE

100% Telemedicine
using MyUPMC
Accepting Consult/Referral to
Lifestyle Medicine in Epic

UPMC Lifestyle Medicine Facts

Adults 18 and older
for individual or
group medical visits

Telemedicine
Appointments Only

Referral to Lifestyle
Medicine

Self-Referral option

Individual <18 years
will be individual
appointments only

No in-person
appointments

In Epic

Call 412-647-8511

Lifestyle Medicine Services

Lifestyle Medicine Assessment

- Individual appointment with a Lifestyle Medicine physician/physician assistant designed to thoroughly review patient medical history, readiness, and appropriateness for Lifestyle Medicine services
- Follow-up appointments scheduled accordingly

Group Medical Visit

- Lifestyle Medicine provider meets with a group of ~8-12 patients with similar health concerns to discuss the topic, learn how lifestyle changes can positively improve health, and then actively work on making changes.
- Duration, frequency, and topics vary

Nutrition Services

- Medical Nutrition Therapy
 - Direct referral to our dietitian
- Nutrition Counseling
 - Co-visit with a nutritionist and physician
- Diabetes Counseling
 - Co-visit with a nutritionist specializing in diabetes/pre-diabetes and a physician

Lifestyle Coaching : Individual and Group Coaching Appointments

- Appointments designed for maintaining, progressing, and assessing the effectiveness of a patient's current Lifestyle Medicine plan and goals via coaching.
- Coaching services are supplemental to other services and appointments are limited

UPMC Lifestyle Medicine

Can see patients who
live in border states

This includes New York,
Maryland, West
Virginia, & Ohio

This allows for
continuity of care from
our referral sources
here @ UPMC.

**INTRODUCTION
TO LIFESTYLE MEDICINE**

**LIFESTYLE MEDICINE FOR
DIABETES & PRE-
DIABETES**

**LIFESTYLE MEDICINE FOR
SLEEP**

**CHOLESTEROL & LIVER
HEALTH: HYPERLIPIDEMIA
& FATTY LIVER**

BRAIN HEALTH

**LIFESTYLE
MEDICINE: STRESS &
MIND BODY MEDICINE**

**MIND BODY
SKILLS GROUPS (4-
VISIT SERIES & 1-
VISIT MAINTENANCE)**

FOOD AS MEDICINE

DIGESTIVE HEALTH

GUT HEALTH

EMOTIONAL EATING

CULINARY MEDICINE

MENS HEALTH

**LIFESTYLE MEDICINE FOR
HIGH BLOOD PRESSURE**

**FODMAPs: EATING FOR
FOOD SENSITIVITIES**

HORMONE HEALTH:

- MENOPAUSE
- PCOS
- Q&A: PERIMENOPAUSE & MENOPAUSE

MONTHLY WEIGHT MANAGEMENT GROUP

ADDICTIONS/HABITS & LIFESTYLE MEDICINE

TOBACCO/NICOTINE

TEACHING KITCHENS

- MEAL PLAN
- MEAL PREP
- EATING OUT

LIFESTYLE INDIVIDUAL & GROUP HEALTH COACHING

Q&A GROUPS

- MANAGING CHOLESTEROL WITH / WITHOUT MEDS
- FATTY LIVER
- MENOPAUSE & PERIMENOPAUSE WITH DR. THOMPSON

EATING WELL FOR LESS

- BUDGET FRIENDLY EATING FOR BREAKFAST, LUNCH, DINNER & SNACKS

SUPPORTING GRIEF WITH LIFESTYLE & MIND-BODY MEDICINE

LIFESTYLE MEDICINE FOR MANAGING INFLAMMATION

COMING SOON: MOVEMENT:

- BEGIN TO MOVE

COMING SOON

- Q&A GROUPS
 - CONSTIPATION
 - REGULATING BLOOD SUGAR

Group Medical Visits

If we have enough common diagnoses

We can build a group visit to meet
the need

Let us know how we can help you
and your patients

PAVING Your Path to Wellness

SECOND EDITION

PAVING

THE PATH TO WELLNESS MANUAL & WORKBOOK

A Guide for Thriving With a Healthy
Body, Peaceful Mind, and Joyful Heart

Action
Investigation
Goals
Purpose
Social Support
Energy

Healthy Body
Physical Activity
Nutrition
Sleep
Stress Resiliency
Attitude
Time Outs
Energy

Peaceful Mind
Stress Resiliency
Attitude
Time Outs
Energy

Joyful Heart
Social Support
Purpose
Goals
Investigation
Variety

PAVING the PATH to WELLNESS

BETH FRATES, MD
MICHELLE TOLLEFSON, MD
AMY COMANDER, MD

PAVING

YOUR PATH THROUGH BREAST CANCER AND BEYOND

Evidence-Based Lifestyle Medicine
Tools for Cancer Survivorship

AMY COMANDER, MD
BETH FRATES, MD
MICHELLE TOLLEFSON, MD

PAVING

A WOMAN'S PATH THROUGH MENOPAUSE AND BEYOND

Michelle Tollefson, MD
Beth Frates, MD
Amy Comander, MD

Achieving
a Healthier Body,
a More Peaceful
Mind, and a More
Joyful Heart

JODI BORNSTEIN

PLANT FORWARD

A PAVING THE PATH TO
WELLNESS COOKBOOK

www.healthylearning.com

*All proceeds from the books go to the non-profit organization
Pavingwellness.org



TOOLKIT

MENOPAUSE LIFESTYLE MEDICINE

Supporting Health and Vitality Through the Menopausal Transition and Beyond

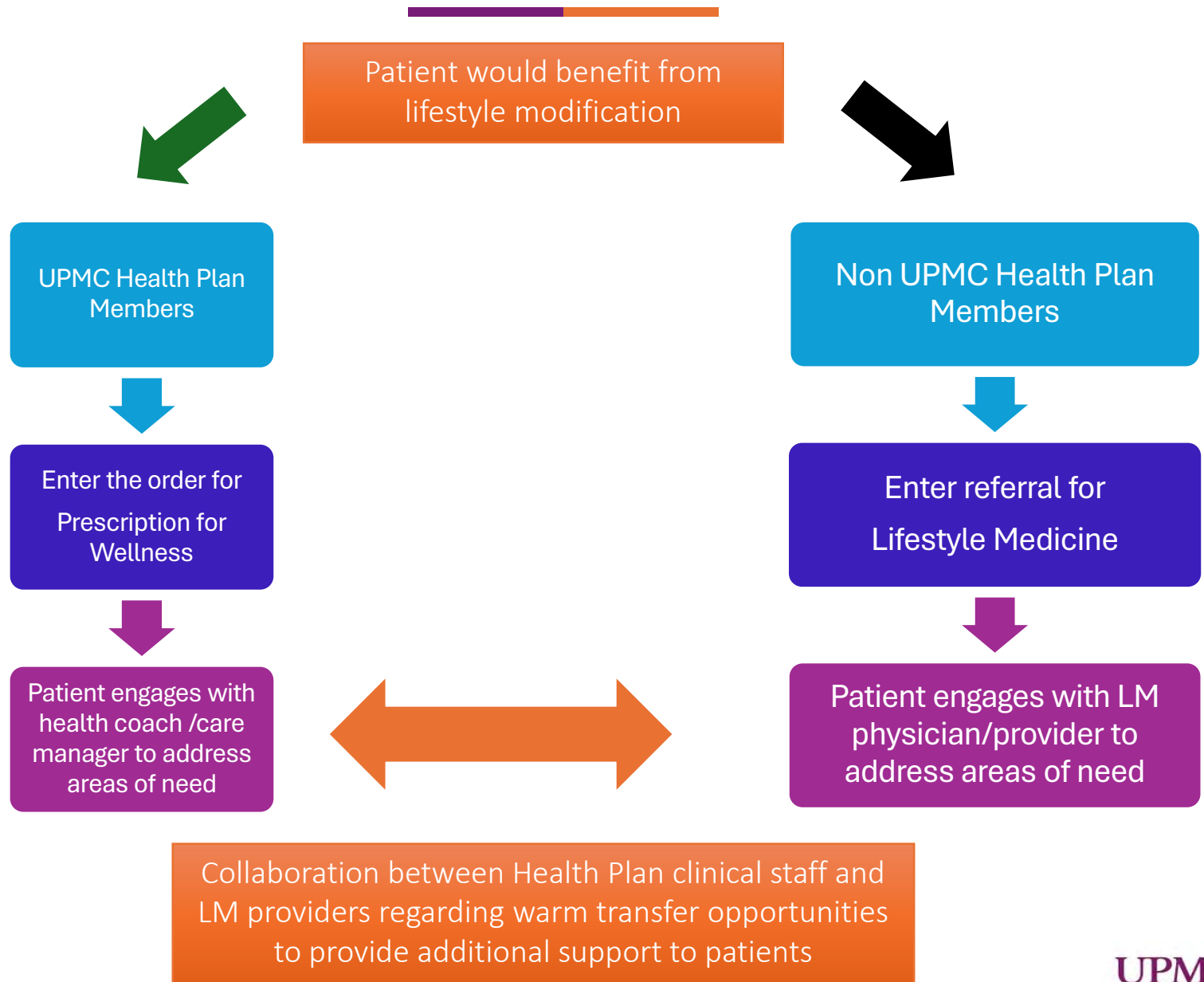


TOOLKIT

LIFESTYLE MEDICINE SHARED MEDICAL APPOINTMENTS

Implementing Sustainable Group Care

Entering a Patient Referral Based on Health Plan Coverage



Lifestyle Medicine

Transformation of Chronic Diseases in a Patient with Obesity



- [WPXI News Story](#)
- <https://www.wpxi.com/news/local/new-castle-woman-says-upmc-program-helped-her-lose-100-pounds/VJ77VR52ZRDMBC4KQ2DTSCPZWQ/>

Baseline

- 50 YO F pt with PMHx of DM, HTN, HLD, food allergies, fibromyalgia, and other conditions presents to her PCP with c/o obesity.
- Multiple GI, MSK, psychiatric, and skin conditions.
- Baseline
 - Takes 23 meds, suffers from pain daily, is hardly able to get out of bed, and on disability.

Vitals show BP 160/98 and HR 85. Weight is 256 lbs (class III/extreme obesity, BMI ≥ 40).

Labs show high total (531) and LDL (423) cholesterol. AST high(91)ALT (62), Cr high (1.22), gFR low (54), + ANA

Results

Baseline:

- BP 160/98, HR 85
- Total cholesterol 531, LDL 423
- 256 lbs, class III/extreme obesity
- 23 daily meds

In Fall '24, after lifestyle transformation:

- BP 106/66, HR 58
- Total cholesterol 199, LDL 135
- LFTs, Cr, gFR, ANA normal
- 140 lbs, normal (20.38) BMI
- 2 daily meds

She reported feeling liberated from a multitude of conditions and said, **"I'm almost 95 percent pain-free now."**



DISCUSSION

- Through the adoption of a Food as Medicine philosophy and adherence to a whole food, plant-based diet, the patient dramatically reduced widespread bodily inflammation, sending multiple **chronic diseases (below) into remission** and holistically **improving her quality of life and now desires to return to work.**

Obesity

Sleep apnea

Food allergies

Arthritis

Hepatic steatosis

Fibromyalgia

Lupus

IBS

Depression

Back pain

DM

HTN

Colitis

Psoriasis

Nephrolithiasis

HLD

Anxiety

MAHA ELEVATE (Make America Healthy Again: Enhancing Lifestyle and Evaluating Value-based Approaches Through Evidence) Model



MAHA ELEVATE will evaluate impacts on cost and quality of evidence-based whole-person care, including functional or lifestyle medicine interventions, in an Original Medicare population.

Background

In 2022, approximately [45% of people with Medicare had four or more chronic conditions](#), and people with chronic conditions accounted for nearly [90% of total health care spending](#). The American health system primarily focuses on treating the symptoms of these conditions and managing diseases.

Through this model, CMS aims to address the core lifestyle choices and human behaviors that are associated with the prevention of chronic disease. Preventive measures begin with empowering people to build healthy practices they can sustain outside of clinicians' offices to help meet their health goals. Over time, this approach is expected to lead to a healthier population and to lower health care costs.

Goals

MAHA Elevate aims to:

- Establish in Original Medicare a novel U.S. evidence base — featuring cost and quality data — on the effectiveness of whole-person functional or lifestyle medicine approaches to care, including psychological, nutritional and physical interventions.
- Empower patients to take control of their health through lifestyle changes.
- Prevent illness and promote wellness through novel approaches to supporting people in behavior changes aimed at improving health or slowing and/or reversing disease progression.

<https://www.cms.gov/priorities/innovation/innovation-models/maha-elevate>

Bonus: ACLM Dot Phrases

- The American College of Lifestyle Medicine (ACLM) patient handouts have been created into dot phrases.
 - Include Spanish versions of the handouts
 - All dot phrases start with .ACLM and can be found by searching under mySmartPhrases. See instructions on next slides
 - We are working to have these easier to access by just typing .ACLM but for now search under mySmart Phrases

Accessing ACLM handouts



Risky Substances



It is well known that tobacco use and drinking too much alcohol increases the risk of many chronic diseases and death. And the inappropriate use of mind-altering substances (drugs) can be associated with serious behavioral, cognitive, and physiological problems.

Treatments for people caught in a cycle of habitual use or exposure to risky behaviors take time, different approaches and many attempts. Patience as well as getting support from others is an important part of reaching your goals.

Effective Treatment Models

- Mental health treatment to help resolve underlying triggers, which may include counseling (individual or support groups)
- Medication-assisted therapies
- Use of other lifestyle medicine pillars (decreasing stress through exercise, healthy eating, improved sleep, decreasing stress through meditation and mindfulness, and improving social relationships)
- Combination of treatments with multiple modalities including support with medication.



Slips and relapses are normal and considered part of the change process. Goal setting, support and persistence is key!

A Note on Alcohol

The 2025 US Surgeon General Report on Alcohol and Cancer highlights alcohol use as a leading preventable cause of cancer in the United States with the more alcohol consumed, the greater the risk for seven different types of cancer. This suggests there is no safe level of alcohol consumption. Furthermore, the International Agency for Research on Cancer (IARC), which is the specialized cancer agency of the World Health Organization (WHO), classifies alcohol as a Group 1 carcinogen, the highest level of classification available.

The 2020-2025 Dietary Guidelines for Americans recommends that adults of legal drinking age can choose not to drink, or to drink in moderation by limiting intake to 2 drinks or less in a day for men or 1 drink or less in a day for women, on days when alcohol is consumed.

Measurements:

One standard alcoholic drink in US:

12 oz beer

5 oz table wine

1.5 oz of 80-proof spirits

Goals for Avoiding Risky Substances

Setting goals around substance use (tobacco, alcohol, or other drugs) is a great way to start making changes. An example of a goal is, "I will swap my morning cigarette with chewing gum at least 5 days this week for the next four weeks. I will ask my partner to help keep me on track and use the free texting service for more support."

Specific - What would you like to decrease/change?

Measurable - How much or how many will you decrease or change?

Achievable - Will you be inspired or overwhelmed by this goal?

Realistic - Can you visualize success? (think about improvement over perfection)

Time-bound - How often or for how long will you make this change?

Lifestyle Sleep Health

Sleep is a pillar of health and maintaining good sleep habits is essential in the management of diabetes or prediabetes.

Tips for Better Sleep

- Keep a consistent sleep schedule. Get up at the same time every day, even on weekends or during vacations.
- Set a bedtime that allows you to get at least 7-8 hours of sleep.
- Don't go to bed unless you are sleepy.
- If you don't fall asleep after 20 minutes, get out of bed. Go do a quiet activity without a lot of light exposure. It is especially important to not get on electronics.
- Establish a relaxing bedtime routine.
- Use your bed only for sleep and sex.
- Make your bedroom quiet and relaxing. Keep the room at a comfortable, cool temperature.
- Limit exposure to bright light in the evenings.
- Turn off electronic devices at least 30 minutes before bedtime.
- Don't eat a large meal before bedtime. If you are hungry at night, eat a light, healthy snack.
- Exercise regularly but do not exercise within 2 hours of bedtime to optimize sleep.
- Avoid consuming caffeine in the afternoon or evening.
- Avoid consuming alcohol before bedtime.
- Reduce your fluid intake before bedtime.

Sleep Management Goals

Setting goals around sleep health is a great way to increase your sleep quality. It's often easier to achieve positive goals. An example of a positive sleep goal is, "I will begin a new bedtime routine of shutting off the television and instead, reading a book for at least 30 minutes before bed, four nights this week."

Specific - What are you going to do to improve your sleep quality/quantity?

Measurable - How much time, how many sessions?

Achievable - How confident are you that you can achieve this goal?

Realistic - What can you actually do? (improvement over perfection)

Time-bound - How frequent? How long will you commit?



Helpful resources:

American Academy of Sleep
Medicine
[AASM.org](https://aasm.org)
[AASM.org Resources](https://aasm.org/resources)

Recommendations for Optimal Sleep

Infants 4 months to 12 months:
12 to 16 hours per 24 hours

Children 1 to 2 years of age:
11 to 14 hours per 24 hours
(including naps)

Children 3 to 5 years of age:
10 to 13 hours per 24 hours
(including naps)

Children 6 to 12 years of age:
9 to 12 hours per 24 hours

Teenagers 13 to 18 years of age:
8 to 10 hours per 24 hours

Adults:
7+ hours of sleep per 24 hours



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lifestylemedicine.org

Take Time for Self-Care



Keep to a Routine



SLEEP

A regular bed time and wake time that allows for 7 to 9 hours of sleep is optimal. Have a wind-down routine that includes limiting screen time and being in a dark, cool room.

EXERCISE

Incorporate physical activity into each day. Stand, rather than sit; take the stairs; stretch; garden; go for a walk. Remember that any movement is better than no movement.

NUTRITION

To balance mood and stabilize blood sugar, eat complex carbohydrates found in fruits, vegetables, whole grains, beans, nuts and seeds at regular intervals throughout the day.

Drink Water

Water consumption for hydration is vital! Daily goal for men: ~15.5 cups (3.7 liters). Daily goal for women: ~11.5 cups (2.7 liters).



Socialize

Reach out to friends, peers, older adults and family by phone, email, text, or social media platforms. Even brief virtual connections improve your mood and immune response.



Don't rely on alcohol as a stress reducer.

Listen to your Body

Know the signs of too much **STRESS**, and ask for help before you think you need it. **Watch out for:** muscle tension, headaches, upset stomach or difficulty sleeping. Be compassionate with yourself as well as with others.



Respect Your Emotions



Establish "no judgment" rules for yourself and your family as you experience a full range of human emotions: fear, anger, gratitude and grief.

References:

<https://www.mayoclinic.org/healthy-lifestyle/nutrition-and-healthy-eating/in-depth/water/art-20044256>
<https://www.hhs.gov/fitness/be-active/physical-activity-guidelines-for-americans/index.html>
<https://www.sciencedirect.com/journal/brain-behavior-and-immunity/vol/61/suppl/C>
<https://www.sleepfoundation.org/articles/how-much-sleep-do-we-really-need>
<http://www.apa.org/helpcenter/stress-body>

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Lifestyle Medicine

HOW TO MAKE A FILLING SALAD

1 LEAFY GREENS

Start with a hefty base of leafy greens, 2 to 3 cups



Baby spinach, chopped kale, Swiss chard, arugula, shredded cabbage, lettuce, spring mix, shaved Brussels sprouts, etc.

2 VEGETABLES

Add texture and color with a variety of vegetables, raw, steamed or roasted, unlimited



Artichoke hearts, asparagus, bell peppers, broccoli, carrots, cauliflower, cucumber, microgreens, mushrooms, onion, snap peas, summer squash, tomatoes, etc.

3 SMART CARBS

Add filling fiber with whole grains, starchy vegetables, and/or fruit, ½ cup



Quinoa, brown or wild rice, farro, barley, potatoes, yams, winter squash, corn, peas, mango, apples, berries, citrus segments, pomegranate seeds

4 PROTEIN

Add hearty plant protein with beans and legumes, ½ cup



Chickpeas, black beans, kidney beans, white beans, green peas, lentils, edamame, organic tofu, organic tempeh

5 TOPPINGS

Add crunch & flavor with nuts, seeds, fresh herbs, and/or fermented foods, 1-2 tbsp



Almonds, walnuts, pistachios, pecans, pumpkin seeds, hemp seeds, nutritional yeast, sundried tomatoes, olives, basil, chives, cilantro, parsley, sauerkraut, kimchi, etc.

6 DRESSING

Add flavor with a squeeze of citrus, a dollop of dip, or a drizzle of dressing



A squeeze of lemon, lime or orange juice, guacamole, balsamic vinegar, white wine vinegar, salsa, hummus, oil-free dressing

SIMPLE & SATISFYING DRESSINGS

Never eat a boring salad again! These simple and satisfying dressings will add bright, bold and delicious flavors with whole food ingredients. Not only for salads, feel free to drizzle these dressings on grain bowls and roasted veggies or use them as dips.

Lemon Tahini Dressing

- ¼ cup tahini
- 2 to 4 tbsp water
- 2 to 3 tbsp lemon juice
- 1 garlic clove, minced
- 1 tbsp maple syrup
- ¼ tsp salt

Balsamic Dressing

- ¼ cup Balsamic vinegar
- 2 tbsp Dijon mustard
- 2 tbsp nutritional yeast
- 1 ½ tsp dried basil or oregano
- 1 tsp maple syrup, optional
- ¼ cup water + more to taste

3-Ingredient Hummus Dressing

- ¼ cup hummus
- 1 lemon, juiced
- ½ tsp garlic powder
- Water, to thin

Fresh Raspberry Dressing

- ½ cup raspberries, mashed or pureed
- ½ tsp Dijon mustard
- 2 tsp balsamic vinegar
- ½ tsp maple syrup
- Salt and pepper to taste

Peanut Sauce

- ¼ cup natural peanut butter
- 1-2 tbsp gluten-free tamari
- 1 tbsp maple syrup
- 1 tbsp lime juice
- ¼ tsp cayenne, optional
- Water, to thin

Cashew Ranch Dressing

- ½ cup raw cashews, soak for 1-hour if you don't have a high speed blender
- ½ cup water
- ½ tsp lemon juice
- ¼ tsp garlic powder
- ¼ tsp onion powder
- ½ tsp dried dill or 1 tbsp fresh dill
- ¼ tsp salt, optional

Blend all ingredients in a high-powered blender or food processor until nice and creamy.

GREEN SMOOTHIE GUIDE

1 LEAFY GREENS

Choose 1-2 cups, fresh or frozen



Spinach, kale, Swiss chard, arugula, parsley, cilantro (free to add other veggies like cauliflower, zucchini, carrots, beets or pumpkin)

2 FRUIT

Choose 1-2 cups, fresh or frozen



Blueberry, strawberry, raspberry, pear, pineapple, banana, apple, mango, cherries, peaches, etc.

3 PROTEIN

Choose 1 serving



Hemp seeds (2-3 Tbsp), plant-based protein powder (1/2-1 scoop) organic silken tofu (1/2 cup), white beans or chickpeas (1/2 cup), unsweetened soy or pea milk (1 cup, counts as liquid too)

4 FAT & FIBER

Choose 1-2 tablespoons



Flax meal, chia seeds, walnuts, avocado, nut butter

5 BOOSTERS

Optional, Choose 1/4 - 1 teaspoon



Spirulina, cinnamon, turmeric (+ black pepper), nutmeg, vanilla extract, Medjool date, ginger, cayenne, cacao powder, cacao nibs, mint

6 LIQUID

Choose 1-2 cups



Filtered water, unsweetened plant milk (soy, pea, almond, cashew, oat, rice), unsweetened coconut water, green tea, ice for thickness

CREAMY BLUEBERRY SMOOTHIE

Serves 1

INGREDIENTS

- 1 large handful baby spinach
- 1/2 cup frozen riced cauliflower (sub frozen chopped zucchini if desired)
- 1 frozen banana (previously peeled, sliced, and frozen)
- 1/2 cup frozen wild blueberries
- 2 tsp hemp seeds
- 1 cup unsweetened plant milk

INSTRUCTIONS

1. Add all ingredients to a high-power blender and blend on high until creamy and smooth. Add additional plant milk or water for a thinner consistency.



TROPICAL KALE SMOOTHIE

Serves 1

INSTRUCTIONS

1. Add all ingredients to a high-power blender and blend on high until creamy and smooth. Add additional plant milk or water for a thinner consistency.



INGREDIENTS

- 1 cup stemmed and chopped kale
- 1 cup frozen tropical fruit blend (mango, pineapple, strawberry)
- 1/2 cup white beans
- 1 tsp chia seeds
- 1 cup unsweetened plant milk

CHOCOLATE ZUCCHINI SMOOTHIE

Serves 1

INGREDIENTS

- 1 cup frozen chopped zucchini
- 1 frozen banana
- 2 tsp hemp seeds
- 1 tsp cacao powder (or unsweetened cocoa powder)
- 1 Medjool date
- 1 cup unsweetened vanilla soy milk

INSTRUCTIONS

1. Add all ingredients to a high-power blender and blend on high until creamy and smooth. Add additional plant milk or water for a thinner consistency.



Overnight Oats: ONE SERVING

Gather ingredients

- 1/2 cup Oats
- 1/2 cup dairy free milk (almond, oat, macadamia, soy, etc)
- 1 tablespoon milled/ground flax seed (optional)
- 1 tablespoon chia seed (optional)
- 1 teaspoon cinnamon (optional)
- 1 teaspoon (small amount) of natural sweetener like agave, honey
- Fruit of your choice
 - Fresh or dried cherries, blueberries, strawberries, blackberries
- Optional nuts
 - Walnut, pecan, cashew, almond, sunflower, pepita

Combine all dry ingredients first then add milk and stir

Let sit over night or for at least 6 hours then enjoy!



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Bountiful Bowls

Lunch, Dinner, Left-Overs



- Gather many ingredients and food items and combine them in one bowl
- Helps with portioning
- Versatile
- Visually appealing: great for mindful eating, eating the rainbow, nutrient density
- Create a balanced meal
- Minimize
 - Dishes & cleanup (environmentally friendly)

HOW TO MAKE A NOURISH BOWL



LEAFY GREENS

2-3 handfuls, raw or lightly cooked

arugula
spinach
kale
lettuce
Swiss chard
shaved brussel sprouts
spring mix
shredded cabbage



OTHER VEGGIES

1 cup, raw, steamed or roasted

artichoke hearts
broccoli
cauliflower
carrots
bell pepper
cucumber
green beans
red onion
zucchini



PROTEIN

½ - 1 cup

beans: garbanzo, black, kidney
lentils
edamame
organic tofu
organic tempeh



FIBER-RICH CARBS

½ - 1 cup

whole grains: quinoa, brown rice, millet, farro
sweet potato
winter squash
corn
peas
fruit: berries, apples, oranges



HEALTHY FATS

limit 1-2 to toppings

avacado (¼)
olives (5)
nuts: walnuts, almonds, pistachio (1 Tbl.)
seeds: pumpkin, hemp, sesame (1 Tbl.)
hummus (2 Tbl.)
dressing (1 Tbl.)



TOPPERS

flavor elements

lemon/lime juice
fresh herbs: mint, parsley, cilantro, chives
nutritional yeast
vinegar: balsamic, apple cider, white
spice blends
salsa

Nourish bowls are a simple way to assemble a meal utilizing already prepared food or ingredients you have in your pantry. A mix of dark leafy greens, protein, complex carbohydrates, vegetables, and healthy fats will provide you with energy and help you feel fuller for longer. Try different herbs, spices and sauces to add variety throughout the week.

Burrito Bowl

Romaine + grilled peppers + roasted sweet potato + black beans + salsa, cilantro, & lime juice

Mediterranean Bowl

Arugula + chopped tomato, cucumber, & red onion + garbanzo beans + quinoa + avocado + lemon juice

Asian Peanut Bowl

Massaged kale (with lime juice) + sliced cucumber & shredded carrots + edamame + brown rice + chopped peanuts + lime juice

Tofu Nicoise

Bibb lettuce + steamed green beans & sliced tomato + baked tofu + steamed new potatoes + sliced olives + Dijon dressing

Tahini Bowl

Spring mix + roasted broccoli & cauliflower + farro + lentils + mint & lemon tahini dressing

DIGITAL RESOURCES



YouTube



Website



Facebook

UPMC Lifestyle Medicine YouTube

<https://www.youtube.com/@UPMCLifestyle>

**UPMC Lifestyle Medicine Website at Pitt
Department of Family Medicine**

<https://www.familymedicine.pitt.edu/upmc-lifestyle-medicine>

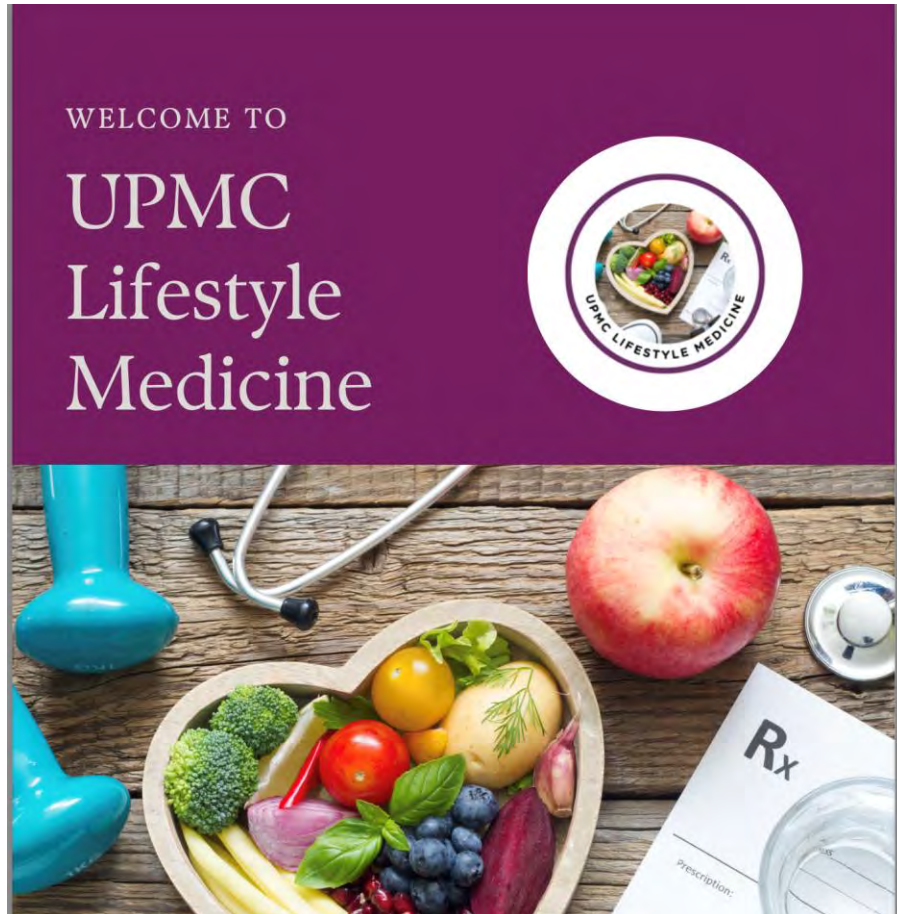
**UPMC Lifestyle Medicine Private Facebook
Group**

<https://www.facebook.com/groups/upmclifestylemedicine>



Go shopping with Dr.
Thompson! learn the best way
to get the ingredients of a
whole-food plant-based diet
seeing this video on YouTube:
[https://www.youtube.com/watch?v=vYxORn3
b8gU](https://www.youtube.com/watch?v=vYxORn3b8gU)

LM GUIDE = smartphrase in Epic



- **UPMC Lifestyle Medicine Guide**
 - This is a 10-page e-book
- To learn more about UPMC Lifestyle Medicine, please click on Lifestyle Medicine Guide or copy/paste the URL below in any browser.
- <https://acrobat.adobe.com/id/urn:aaid:sc:VA6C2:291ecf9d-c8c2-4301-b976-4f41410416d7>

FREE

ACLM Lifestyle Medicine & Food as Medicine Essentials Course

In September 2022, the White House granted UPMC 5.5 education credits for healthcare workers.

This highlights the need for medical professionals to be educated, equipped, and empowered to prescribe nutrition and other lifestyle treatment modalities to address the unhealthy behaviors causing a majority of the chronic diseases in our country.

The complementary course includes:

- Intro to Lifestyle Medicine: 1-hour credit
- Food as Medicine: Nutrition for Prevention and Longevity: 3-hour credit
- Food as Medicine: Nutrition for Treatment and Risk Reduction: 1.5-hour credit

How to register:

Search "ACLM" in HR Direct Learning on a UPMC device, or scan the QR code on any smart device

REGISTER
HERE





The New York Times

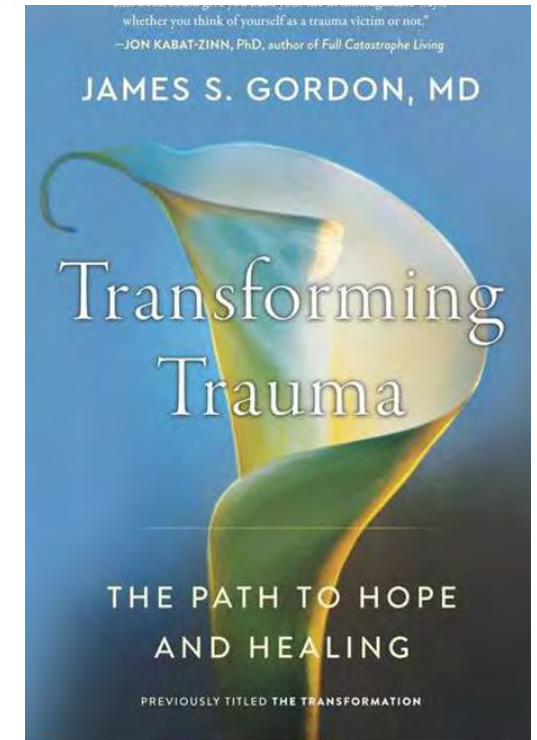


Doctors, Facing Burnout, Turn to Self-Care

A growing number of programs aim to help doctors, nurses and medical students who are struggling with mental health issues during the pandemic.



The Center for
**Mind-Body
Medicine**



Online MBM skill groups at

The Center for Mind-Body Medicine

<https://cmbm.org/onlinegroup/>

ABRIDGE

Developed @ UPMC:



Artificial Intelligence as SCRIBE to reduce physician burnout from notetaking. NYT article: reduced pajama time, increased family time and free time, allowing physicians to more mindfully practice medicine.

The New York Times
"All the News That's Fit to Print" TUESDAY, JUNE 27, 2023 Reprinted With Permission

National

A.I. May Someday Work Medical Miracles. For Now, It Helps Do Paperwork.

The best use for generative A.I. in health care, doctors say, is to ease the heavy burden of documentation that takes them hours a day and contributes to burnout.



ADAM MELTZER FOR THE NEW YORK TIMES

Dr. Matthew Hitchcock, a family practice physician in Tennessee, uses Abridge A.I. software to produce summaries of patient visits.



ADAM MELTZER FOR THE NEW YORK TIMES

Abridge, founded in 2018, provides an automated solution to a modern clerical overload in health care by using A.I. to record and generate a summary of patient visits.



MAIGRE McCAVEY FOR THE NEW YORK TIMES

Using A.I. software, Dr. Michelle Thompson said, has freed up two hours in her workday and has helped patients become more engaged in their care.

By STEVE LOHR

Dr. Matthew Hitchcock, a family physician in Chattanooga, Tenn., has an A.I. helper.

It records patient visits on his smartphone and summarizes them for treatment plans and billing. He does some light editing of what the A.I. produces, and is done with his daily patient visit documentation in 20 minutes or so.

Dr. Hitchcock used to spend up to two hours typing up these medical notes after his four children went to bed. "That's a thing of the past," he said. "It's quite awesome."

ChatGPT-style artificial intelligence is coming to health care, and the grand vision of what it could bring is inspiring. Every doctor, enthusiasts predict, will have a superintelligent sidekick, dispensing suggestions to improve care.

But first will come more mundane applications of artificial intelligence. A prime target will be to ease the crushing burden of digital paperwork that physicians must produce, typing lengthy notes into electronic medical records required for treatment, billing and administrative purposes.

For now, the new A.I. in health care is going to be less a genius partner than a tireless scribe.

From leaders at major medical centers to family physicians, there is optimism that health care will benefit from the latest advances in generative A.I. — technology that can produce everything from poetry to computer programs, often with human-level fluency.

A mundane task responsible for high levels of burnout.

But medicine, doctors emphasize, is not a wide open terrain of experimentation. A.I.'s tendency to occasionally create fabrications, or so-called hallucinations, can be amusing, but not in the high-stakes realm of health care.

That makes generative A.I., they say,

very different from A.I. algorithms, already approved by the Food and Drug Administration, for specific applications, like scanning medical images for cell clusters or subtle patterns that suggest the presence of lung or breast cancer. Doctors are also using chatbots to communicate more effectively with some patients.

Physicians and medical researchers say regulatory uncertainty, and concerns about patient safety and litigation, will slow the acceptance of generative A.I. in health care, especially its use in diagnosis and treatment plans.

Those physicians who have tried out the new technology say its performance has improved markedly in the last year. And the medical note software is designed so that doctors can check the A.I.-generated summaries against the words spoken during a patient's visit, making it verifiable and bolstering trust.

"At this stage, we have to pick our use cases carefully," said Dr. John Halamka, president of Mayo Clinic Platform, who oversees the health system's adoption of artificial intelligence. "Reducing the documentation burden would be a huge win on its own."



Using A.I. software, Dr. Michelle Thompson said, has freed up two hours in her work day and has helped patients become more engaged in their care.

Recent studies show that doctors and nurses report high levels of burnout, prompting many to leave the profession. High on the list of complaints, especially for primary care physicians, is the time spent on documentation for electronic health records. That work often spills over into the evenings, after-office-hours toll that doctors refer to as "pajama time."

Generative A.I., experts say, looks like a promising weapon to combat the physician workload crisis.

"This technology is rapidly improving at a time health care needs help," said Dr. Adam Landman, chief information officer of Mass General Brigham, which includes Massachusetts General Hospital and Brigham and Women's Hospital in Boston.

For years, doctors have used various



Studies show that patients forget up to 80 percent of what physicians say during a visit, so an A.I.-generated summary is a resource for patients to return to.

kinds of documentation assistance, including speech recognition software and human transcribers. But the latest A.I. is doing far more: summarizing, organizing and tagging the conversation between a doctor and a patient.

Companies developing this kind of technology include Abridge, Ambience Healthcare, Augmedix, Nuance, which is part of Microsoft, and Suki.

Ten physicians at the University of Kansas Medical Center have been using generative A.I. software for the last two months, said Dr. Gregory Ator, an ear, nose and throat specialist and the center's chief medical informatics officer. The medical center plans to eventually make the software available to its 2,200 physicians.

But the Kansas health system is steering clear of using generative A.I. in diagnosis, concerned that its recommendations may be unreliable and that its reasoning is not transparent. "In medicine, we can't tolerate hallucinations," Dr. Ator said. "And we don't like black boxes."

The University of Pittsburgh Medical Center has been a test bed for Abridge, a start-up led and co-founded by Dr. Shivley Rao, a practicing cardiologist who was also an executive at the medical center's venture arm.

Abridge was founded in 2018, when large language models, the technology engine for generative A.I., emerged. The technology, Dr. Rao said, opened a door to an automated solution to the clerical overload in health care, which he saw around him, even for his own father.

"My dad retired early," Dr. Rao said.

"He just couldn't type fast enough."

Today, the Abridge software is used by more than 1,000 physicians in the University of Pittsburgh medical system.

Dr. Michelle Thompson, a family physician in Hermitage, Pa., who specializes in lifestyle and integrative care, said the software had freed up nearly two hours in her day. Now, she has time to do a yoga class, or to linger over a sitdown family dinner.

Another benefit has been to improve the experience of the patient visit, Dr. Thompson said. There is no longer typing, notetaking or other distractions. She simply asks patients for permission to record their conversation on her phone.

"A.I. has allowed me, as a physician, to be 100 percent present for my patients," she said.

The A.I. tool, Dr. Thompson added, has also helped patients become more engaged in their own care. Immediately after a visit, the patient receives a summary, accessible through the University of Pittsburgh medical system's online portal.

The software translates any medical terminology into plain English at about a fourth-grade reading level. It also provides a re-cording of the visit with "medical moments" color-coded for medications, procedures and diagnoses. The patient can click on a colored tag and listen to a portion of the conversation.

Studies show that patients forget up to 80 percent of what physicians and nurses say during visits. The recorded and A.I.-generated summary of the visit, Dr. Thompson said, is a resource her patients can return to for reminders to take medications, exercise or schedule follow-up visits.

After the appointment, physicians receive a clinical note summary to review. There are links back to the transcript of the doctor-patient conversation, so the A.I.'s work can be checked and verified. "That has really helped me build trust in the A.I.," Dr. Thompson said.

In Tennessee, Dr. Hitchcock, who also uses Abridge software, has read the reports of ChatGPT scoring high marks on standard medical tests and heard the predictions that digital doctors will improve care and solve staffing shortages.

Dr. Hitchcock has tried ChatGPT and is impressed. But he would never think of loading a patient record into the chatbot and asking for a diagnosis, for legal, regulatory and practical reasons. For now, he is grateful to have his evenings free, no longer mired in the tedious digital documentation required by the American health care industry.

And he sees no technology cure for the health care staffing shortage. "A.I. isn't going to fix that anytime soon," said Dr. Hitchcock, who is looking to hire another doctor for his four-physician practice.

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Lifestyle Medicine Interest Group

- OT, PT, APPs, physicians, pharmacists, residents, nurses, dietitians, respiratory therapists, students, educators, health care administrators, patient navigators, social and community health workers, kinesiologist, health coach, allied health, etc.
- ANY hospital or private practice affiliation
- Open to ALL interested in lifestyle medicine
- Sign Up Here
palifestylemedicinegroup@gmail.com



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Research on UPMC
Physician Well-
Being Survey Data

Physicians for
Physicians

Physician Peer
Coach Approach
Training Program

Physician
Leadership
Rounding

Destigmatizing
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Artificial Intelligence as SCRIBE to reduce physician burnout from notetaking. NYT article: reduced pajama time, increased family time and free time, allowing physicians to more mindfully practice medicine.

The New York Times
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National

A.I. May Someday Work Medical Miracles. For Now, It Helps Do Paperwork.

The best use for generative A.I. in health care, doctors say, is to ease the heavy burden of documentation that takes them hours a day and contributes to burnout.



ARABAMELTON FOR THE NEW YORK TIMES

Dr. Matthew Hitchcock, a family practice physician in Tennessee, uses Abridge A.I. software to produce summaries of patient visits.



ARABAMELTON FOR THE NEW YORK TIMES

Abridge, founded in 2018, provides an automated solution to a modern clerical overload in health care by using A.I. to record and generate a summary of patient visits.



MAIGRE McCAVEY FOR THE NEW YORK TIMES

Using A.I. software, Dr. Michelle Thompson said, has freed up two hours in her workday and has helped patients become more engaged in their care.

By STEVE LOHR

Dr. Matthew Hitchcock, a family physician in Chattanooga, Tenn., has an A.I. helper.

It records patient visits on his smartphone and summarizes them for treatment plans and billing. He does some light editing of what the A.I. produces, and is done with his daily patient visit documentation in 20 minutes or so.

Dr. Hitchcock used to spend up to two hours typing up these medical notes after his four children went to bed. "That's a thing of the past," he said. "It's quite awesome."

ChatGPT-style artificial intelligence is coming to health care, and the grand vision of what it could bring is inspiring. Every doctor, enthusiasts predict, will have a superintelligent sidekick, dispensing suggestions to improve care.

But first will come more mundane applications of artificial intelligence. A prime target will be to ease the crushing burden of digital paperwork that physicians must produce, typing lengthy notes into electronic medical records required for treatment, billing and administrative purposes.

For now, the new A.I. in health care is going to be less a genius partner than a tireless scribe.

From leaders at major medical centers to family physicians, there is optimism that health care will benefit from the latest advances in generative A.I. — technology that can produce everything from poetry to computer programs, often with human-level fluency.

A mundane task responsible for high levels of burnout.

But medicine, doctors emphasize, is not a wide open terrain of experimentation. A.I.'s tendency to occasionally create fabrications, or so-called hallucinations, can be amusing, but not in the high-stakes realm of health care.

That makes generative A.I., they say,

very different from A.I. algorithms, already approved by the Food and Drug Administration, for specific applications, like scanning medical images for cell clusters or subtle patterns that suggest the presence of lung or breast cancer. Doctors are also using chatbots to communicate more effectively with some patients.

Physicians and medical researchers say regulatory uncertainty, and concerns about patient safety and litigation, will slow the acceptance of generative A.I. in health care, especially its use in diagnosis and treatment plans.

Those physicians who have tried out the new technology say its performance has improved markedly in the last year. And the medical note software is designed so that doctors can check the A.I.-generated summaries against the words spoken during a patient's visit, making it verifiable and bolstering trust.

"At this stage, we have to pick our use cases carefully," said Dr. John Halamka, president of Mayo Clinic Platform, who oversees the health system's adoption of artificial intelligence. "Reducing the documentation burden would be a huge win on its own."



Using A.I. software, Dr. Michelle Thompson said, has freed up two hours in her work day and has helped patients become more engaged in their care.

Recent studies show that doctors and nurses report high levels of burnout, prompting many to leave the profession. High on the list of complaints, especially for primary care physicians, is the time spent on documentation for electronic health records. That work often spills over into the evenings, after-office-hours toll that doctors refer to as "pajama time."

Generative A.I., experts say, looks like a promising weapon to combat the physician workload crisis.

"This technology is rapidly improving at a time health care needs help," said Dr. Adam Landman, chief information officer of Mass General Brigham, which includes Massachusetts General Hospital and Brigham and Women's Hospital in Boston.

For years, doctors have used various

kinds of documentation assistance, including speech recognition software and human transcribers. But the latest A.I. is doing far more: summarizing, organizing and tagging the conversation between a doctor and a patient.

Companies developing this kind of technology include Abridge, Ambience HealthCare, Augmedix, Nuance, which is part of Microsoft, and Suki.

Ten physicians at the University of Kansas Medical Center have been using generative A.I. software for the last two months, said Dr. Gregory Ator, an ear, nose and throat specialist and the center's chief medical informatics officer. The medical center plans to eventually make the software available to its 2,200 physicians.

But the Kansas health system is steering clear of using generative A.I. in diagnosis, concerned that its recommendations may be unreliable and that its reasoning is not transparent. "In medicine, we can't tolerate hallucinations," Dr. Ator said. "And we don't like black boxes."

The University of Pittsburgh Medical Center has been a test bed for Abridge, a start-up led and co-founded by Dr. Shivley Rao, a practicing cardiologist who was also an executive at the medical center's venture arm.

Abridge was founded in 2018, when large language models, the technology engine for generative A.I., emerged. The technology, Dr. Rao said, opened a door to an automated solution to the clerical overload in health care, which he saw around him, even for his own father.

"My dad retired early," Dr. Rao said.



Studies show that patients forget up to 80 percent of what physicians say during a visit, so an A.I.-generated summary is a resource for patients to return to.

"He just couldn't type fast enough."

Today, the Abridge software is used by more than 1,000 physicians in the University of Pittsburgh medical system.

Dr. Michelle Thompson, a family physician in Hermitage, Pa., who specializes in lifestyle and integrative care, said the software had freed up nearly two hours in her day. Now, she has time to do a yoga class, or to linger over a sitdown family dinner.

Another benefit has been to improve the experience of the patient visit, Dr. Thompson said. There is no longer typing, notetaking or other distractions. She simply asks patients for permission to record their conversation on her phone.

"A.I. has allowed me, as a physician, to be 100 percent present for my patients," she said.

The A.I. tool, Dr. Thompson added, has also helped patients become more engaged in their own care. Immediately after a visit, the patient receives a summary, accessible through the University of Pittsburgh medical system's online portal.

The software translates any medical terminology into plain English at about a fourth-grade reading level. It also provides a re-cording of the visit with "medical moments" color-coded for medications, procedures and diagnoses. The patient can click on a colored tag and listen to a portion of the conversation.

Studies show that patients forget up to 80 percent of what physicians and nurses say during visits. The recorded and A.I.-generated summary of the visit, Dr. Thompson said, is a resource her patients can return to for reminders to take medications, exercise or schedule follow-up visits.

After the appointment, physicians receive a clinical note summary to review. There are links back to the transcript of the doctor-patient conversation, so the A.I.'s work can be checked and verified. "That has really helped me build trust in the A.I.," Dr. Thompson said.

In Tennessee, Dr. Hitchcock, who also uses Abridge software, has read the reports of ChatGPT scoring high marks on standard medical tests and heard the predictions that digital doctors will improve care and solve staffing shortages.

Dr. Hitchcock has tried ChatGPT and is impressed. But he would never think of loading a patient record into the chatbot and asking for a diagnosis, for legal, regulatory and practical reasons. For now, he is grateful to have his evenings free, no longer mired in the tedious digital documentation required by the American health care industry.

And he sees no technology cure for the health care staffing shortage. "A.I. isn't going to fix that anytime soon," said Dr. Hitchcock, who is looking to hire another doctor for his four-physician practice.

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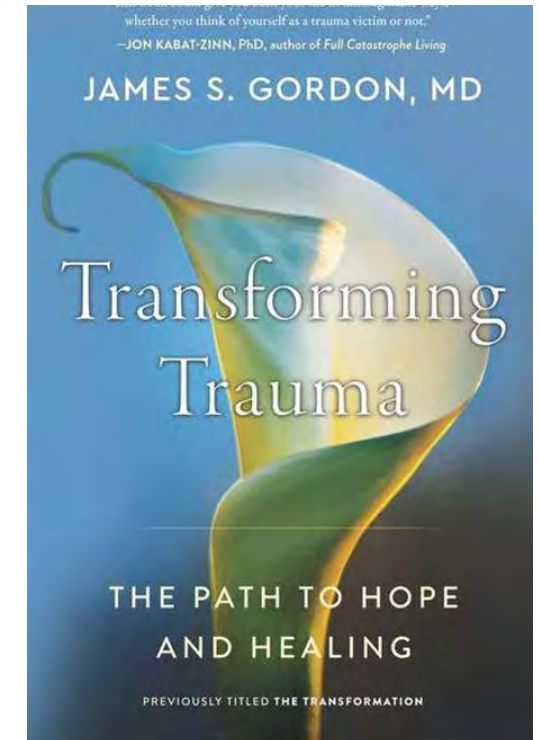


Doctors, Facing Burnout, Turn to Self-Care

A growing number of programs aim to help doctors, nurses and medical students who are struggling with mental health issues during the pandemic.



The Center for
**Mind-Body
Medicine**



Online MBM skill groups at

The Center for Mind-Body Medicine:

<https://cmbm.org/onlinegroup/>



The Center for
**Mind-Body
Medicine**

YouTube Channel:

<https://www.youtube.com/user/cmbmuser>



<https://www.wholeheartedmedicine.org/resources>



YouTube Channel:

<https://www.youtube.com/channel/UCRcm8ziVeLa5yp6IAypigmQ>



AMERICAN COLLEGE OF
Lifestyle Medicine



The graphic has a dark blue background with decorative geometric shapes in the corners: a yellow and blue triangle in the top-left and a blue and yellow triangle in the bottom-right. In the top-right corner, there is a circular inset photo of a woman with dark hair, wearing a purple top, with her hands clasped in a prayer-like gesture. The text "GETTING STARTED WITH GROUP MEDICAL VISITS" is written in large, bold, yellow capital letters in the center. Below this, in smaller white text, are the credentials: "Michelle Thompson DO, AOBFP, ABOIM, DipABLM, FACLM". In the top-right corner, the UPMC logo is visible, featuring the text "UPMC" in white on a purple background, with "LIFE CHANGING MEDICINE" in smaller white text below it.

GETTING STARTED WITH
GROUP MEDICAL VISITS
W/ DR. MICHELLE
THOMPSON

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