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(REVIEW ARTICLE)



## The universal magic medicine called as lifestyle medicine: A life story

J.C Balachandar 1,\* and M. Jayachandran 1,2

- <sup>1</sup> Dr. Bala's School of Fitness & Preventive Medicine, Faridabad, Delhi-NCR, India.
- <sup>2</sup> Department of Physics, Sethu Institute of Technology, Kariyapatti, India.

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## **Abstract**

I had long been interested with Naturopathy, but my knowledge of it came mainly from practices of reading books. When one person symptoms with other person symptoms are of no import, it is important to match the patient's symptoms with one substance that most closely reproduces them. Objective of the current review is to understand the success of one such based 'Lifestyle medicine' model, executed at various government rural and urban settings in Tamil Nadu, South India. The patient trends and health conditions with which they had visited these life style medicine and Naturopathy centers are presented in this article

Keywords: Life style clinical model; Rural background people; Naturopathy; Tamil Nadu

## 1. Background

I am Dr. Balachandar Jayachandran, lifestyle & preventive medicine expert, health & fitness lifestyle advisor-certified by the European lifestyle medicine organization, nutritional expert certified by the international career institute-London, member of the British society of lifestyle medicine, member of the European lifestyle medicine organization, member of the international society for physical activity & health and one of the leading lifestyle & preventive medicine expert of India and I own a center for disease prevention called as Dr. Bala's school of fitness & preventive medicine where I took the case of Mr. Sanjaykhurana, a 47 year old male, a busy professional who works late night with enormous work pressure, following a sedentary lifestyle & erratic eating habits with multiple medical & physical problems which includes obesity, high cholesterol, high blood pressure, high blood sugar, high HBA1C,high uric acid, high homocysteine, high liver enzyme (SGOT) and along with that he was consuming a cocktail of medications [1-2].

#### 2. Introduction

Preventive medicine is NOT alternative or integrative medicine. This is a science-based, fundamental change in our way of thinking about health and disease leading to disease prevention & everlasting health. Addresses the underlying causes & root of diseases based on symptoms and engaging both patient and practitioner in a therapeutic & preventive partnership. It is an evolution in the practice of medicine that better addresses the healthcare needs of the 21st century. we prescribe tailor made diets, scientifically designed exercises, lifestyle modifications, vitamin & mineral pooling as per the patients current medical & physical status and through this make a patient come out of his medical, physical & psychological problems following an evidence based approach [3].

This is exactly where we started his lifestyle medicine treatment program, I designed his tailor made & evidence based lifestyle medicine plan based on subject specific anti-inflammatory, fat loss & holistic medical reversal strategies backed by the key lifestyle medicine pillars such as physical activity-tailor made scientific exercises, nutrition-custom made

\*Corresponding author: J.C Balachandar

Dr.Bala's School of Fitness & Preventive Medicine, Faridabad, Delhi-NCR, India.

diet plans, specific relaxation therapy along with sleep management strategies. In exactly 4 months time, we could successfully make him lose 42kgs/92.5 pounds of fat and along with that we could successfully reverse his disturbed medical parameters and regulate his high cholesterol levels, high blood pressure levels, high blood sugar levels, high uric acid levels, high liver enzyme levels, high homocysteine levels and all the above said parameters came to an absolutely normal & safe zone within 4 months of time and also we could successfully stop all his medications with the exception of the blood pressure tablet which was tapered to the minimum dose [4].

## **Objective**

International trade data is used to examine expenditure on imports of medicinal and pharmaceutical products in less developed countries. There are wide variations between countries in expenditure per head on medicines and in expenditure per physician. Medicines expenditure, largely for curative rather than preventive purposes, has been a rising proportion of total health expenditure in most third world countries. Overwhelming evidence shows that physical activity and exercise promotion and prescription are effective in preventing and managing numerous chronic conditions. With physiotherapists commonly referred to as 'exercise prescription experts', an in-depth knowledge of exercise promotion and prescription is assumed. However, to date, no information exists about what is or should be included in terms of undergraduate physiotherapy physical activity and exercise education, nor whether the content prepares graduates to be exercise experts for contemporary practice.

#### 3. Material and methods

#### 3.1. Methods & materials-lifestyle medicine pillars

#### 3.1.1. Physical activity-scientific exercises

- Cardio respiratory exercises (walk followed by jogging and then 1:1 walk jog interval pattern)
- Functional training
- Hiit(high intensity interval training)
- Progressive resistance training with minimum weights or resistance
- Complete stretching

All the above said exercises were designed as per the patient's current medical & physical status/requirements, which helped him regulate the blood pressure levels and cut down the fat/cholesterol holistically.

#### 3.1.2. Nutrition-custom made diet plans: mediterranean diet

A specifically designed diet based on the principles of Mediterranean diet as per the patients medical & physical status / requirements loaded with flavorful ingredients like fruits, vegetables, whole grains and heart-healthy fats and his regular oil was replaced by olive oil, which therapeutically has variety of benefits and will come with loads of loads of anti-inflammatory properties and help support brain function, promote heart health, regulate blood sugar levels, cut down cholesterol/fat and more [5].

#### 3.1.3. Relaxation therapy-the quintessential recovery science

## Autogenic relaxation

Autogenic means something that comes from within you. In this relaxation technique, you use both visual imagery and body awareness to reduce stress. You repeat words or suggestions in your mind that may help you relax and reduce muscle tension. For example, you may imagine a peaceful setting. Then you can focus on relaxing your breathing, slowing your heart rate, or feeling different physical sensations, such as relaxing each arm or leg one by one.

## Progressive muscle relaxation

In this relaxation technique, you focus on slowly tensing and then relaxing each muscle group. This can help you focus on the difference between muscle tension and relaxation. You can become more aware of physical sensations.

## Deep breathing exercises

- Alternate-Nostril Breathing exercise
- Belly Breathing exercise
- 4-7-8 Breathing exercise

#### Massage

Weekly once a complete whole body massage.

#### Meditation

Thrice a day for 10 minutes each [6].

3.1.4. Sleep management strategies-refreshes your cells

Sticking to a sleep schedule-reinforcing sleep wake cycle

The recommended amount of sleep for a healthy adult is at least seven hours. Most people don't need more than eight hours in bed to be well rested. Go to bed and get up at the same time every day, including weekends. Being consistent reinforces your body's sleep-wake cycle. If you don't fall asleep within about 20 minutes of going to bed, leave your bedroom and do something relaxing. Read or listen to soothing music. Go back to bed when you're tired. Repeat as needed, but continue to maintain your sleep schedule and wake-up time [7-9].

Paying attention to what you eat and drink

Don't go to bed hungry or stuffed. In particular, avoid heavy or large meals within a couple of hours of bedtime. Discomfort might keep you up. Nicotine, caffeine and alcohol deserve caution, too. The stimulating effects of nicotine and caffeine take hours to wear off and can interfere with sleep. And even though alcohol might make you feel sleepy at first, it can disrupt sleep later in the night.

#### Creating a restful environment

Keeping the room cool, dark and quiet is the key. Exposure to light in the evenings might make it more challenging to fall asleep. We have to avoid prolonged use of light-emitting screens (mobile, laptops & television) just before bedtime. Consider using room-darkening shades, earplugs, a fan or other devices to create an environment that suits your needs. Doing calming activities before bedtime, such as taking a bath or using relaxation techniques will promote better sleep [10-13].

## 4. Results and discussion

After following the tailor made lifestyle medicine plan based on subject specific anti-inflammatory, fat loss & holistic medical reversal strategies backed by the key lifestyle medicine pillars such as physical activity-tailor made scientific exercises, nutrition-custom made diet plans, specific relaxation therapy along with sleep management strategies. In exactly 4 months time, we could successfully make Mr. Sanjaykhurana lose 42kgs/92.5pounds of fat and along with that we could successfully reverse his disturbed medical parameters and make him stop all the tablets consumed by him with the only exception of the high blood pressure tablet, which was tapered to the minimum dose [14-16].

#### 4.1. Complete medical & physical transformation-final results

#### 4.1.1. Weight

107KGS/235LB, on day one to 65KGS/143LB, current status after 4 months.

## 4.1.2. Blood pressure

151/106 mmHg, on day one to 124/88 mmHg, current status after 4 months.

#### 4.1.3. Cholesterol

210 MG/DL on day one to 160 MG/DL, current status after 4 months.

## 4.1.4. Liver enzyme(sgot)

61 U/L on day one to 23.8 U/L, current status after 4 months.

## 4.1.5. Homocysteine

 $46 \mu mol/L$  on day one to  $15.7 \mu mol/L$ , current status after 4 months.

4.1.6. Blood sugar

122 MG/DL on day one to 70 MG/DL, current status after 4 months.

4.1.7. HBA1C

5.9 on day one to 4.9, current status after 4 months.

4.1.8. Uric acid

9 MG/DL on day one to 5.4 MG/DL, current status after 4 months.

#### 5. Conclusion

Due to increasing importance to business competition, education, career and money, today's society is running behind them and driving away its proven simple lifestyle forbidding good health. Negligence to personal lifestyle leads to vicious circle of bad health of all the family members. As a result there is rise in obesity, blood pressure, diabetes, heart diseases, cancer at a young age. The mental stress also fuels the problems. To remain in the rat race one utilizes his best period of life in hard work under tension ignoring his/her health. In this age itself, a no exercise life, eating out frequently, irregular and imbalanced food, late night sleeping and addiction leads people away from good health. When it comes to lifestyle diseases, instead of treatments & medications for the acquired diseases, one should strive for preventing all diseases and this alone is the best remedy. For it there is a grave need to make suitable changes in the lifestyle. We should learn to strictly watch how much and what we eat and how much we exercise. To ask such a question to oneself will be a turning point in case of inheriting health in your life. Changing one's lifestyle is an easy and achievable task and helps you prevent chronic diseases.

To conclude, I request people all over the world to embrace lifestyle medicine and enjoy a disease free & stress free life. The key ideology behind lifestyle medicine focuses on protecting, promoting and maintaining health and well-being through life style approaches. It aims to avert disease, disability, and death on an individual basis, as well as on a large scale in communities and populations through a calculated lifestyle based on the lifestyle pillars and modalities let's embrace lifestyle medicine & let's aim for a disease-free world.

## Compliance with ethical standards

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Disclosure of conflict of interest

There is no conflict of interest.

#### References

- [1] Maheshkumar, K., Venugopal, V., Poonguzhali, S., Mangaiarkarasi, N., Venkateswaran, S.T. and Manavalan, N., 2020. Trends in the use of Yoga and Naturopathy based lifestyle clinics for the management of Non-communicable diseases (NCDs) in Tamilnadu, South India. *Clinical Epidemiology and Global Health*, 8(2), pp.647-651.
- [2] Salwa, H. and Nair, P.M., 2021. Raising burden of non-communicable diseases: importance of integrating Yoga and Naturopathy at primary care level. *Journal of Complementary and Integrative Medicine*, 18(2), pp.271-278.
- [3] Gaziano, T.A., Reducing the growing burden of cardiovascular disease in the developing world. Health affairs, 2007, 26(1), pp.13-24.
- [4] Gaziano, T.A., Reducing the growing burden of cardiovascular disease in the developing world. Health affairs, 2007, 26(1), pp.13-24.
- [5] Lawton, J., Ahmad, N., Hanna, L., Douglas, M. and Hallowell, N., 'I can't do any serious exercise': barriers to physical activity amongst people of Pakistani and Indian origin with Type 2 diabetes. Health education research, 2006, 21(1), pp.43-54.

- [6] Paul, V.K., Sachdev, H.S., Mavalankar, D., Ramachandran, P., Sankar, M.J., Bhandari, N., Sreenivas, V., Sundararaman, T., Govil, D., Osrin, D. and Kirkwood, B., Reproductive health, and child health and nutrition in India: meeting the challenge. The Lancet, 2011, 377(9762), pp.332-349.
- [7] Booth, F.W., Gordon, S.E., Carlson, C.J. and Hamilton, M.T., Waging war on modern chronic diseases: primary prevention through exercise biology. Journal of applied physiology, 2000, 88(2), pp.774-787
- [8] Booth, F.W., Gordon, S.E., Carlson, C.J. and Hamilton, M.T., Waging war on modern chronic diseases: primary prevention through exercise biology. Journal of applied physiology, 2000, 88(2), pp.774-787.
- [9] Dutta-Bergman, M.J., The unheard voices of Santalis: Communicating about health from the margins of India. Communication Theory, 2004, 14(3), pp.237-263
- [10] Bhatia, D., Bejarano, T. and Novo, M., Current interventions in the management of knee osteoarthritis. Journal of pharmacy &bioallied sciences, 2013, 5(1), p.30.
- [11] Alagesan, J., Kumaresan, A., Anandh, V. and Kandasamy, G., Knowledge of Undergraduate Medical Students Regarding Current Physiotherapy Profession. Journal of Research in Medical Education & Ethics, 2014, 4(3), pp.297-302.
- [12] Kamalakannan, S., Venkata, M.G., Prost, A., Natarajan, S., Pant, H., Chitalurri, N., Goenka, S. and Kuper, H., Rehabilitation needs of stroke survivors after discharge from hospital in India. Archives of physical medicine and rehabilitation, 2016, 97(9), pp.1526-1532
- [13] Browne, S.G., The training and deployment of medical auxiliaries in the leprosy campaign. Annals of Tropical Medicine & Parasitology,1975, 69(4), pp.413-416
- [14] Taylor, N.F., Dodd, K.J., Shields, N. and Bruder, A., Therapeutic exercise in physiotherapy practice is beneficial: a summary of systematic reviews 2002–2005. Australian Journal of Physiotherapy, 2007, 53(1), pp.7-16.
- [15] Lewis, A., Morris, M.E. and Walsh, C., Are physiotherapy exercises effective in reducing chronic low back pain?. Physical Therapy Reviews, 2008, 13(1), pp.37-44
- [16] Sterling, M., Smeets, R., Keijzers, G., Warren, J. and Kenardy, J., Physiotherapist-delivered stress inoculation training integrated with exercise versus physiotherapy exercise alone for acute whiplash-associated disorder (StressModex): a randomised controlled trial of a combined psychological/physical intervention. British Journal of Sports Medicine, 2019, 53(19), pp.1240-1247