FROM THE ACLM President's DESK

George E. Guthrie, MD, MPH, CDE,
CNS, FAAFP, FACLM

What Is Lifestyle Medicine?

Abstract: *Lifestyle Medicine is still being defined. The ACLM is making significant progress in defining it within the house of medicine. The new American and International Boards of Lifestyle Medicine go a long way in identifying the clinical parameters for this new specialty. The board review course defines the academic corpus in a clear way. Now that Lifestyle Medicine has clear borders it needs to be spread throughout the cultures of the world. People in all walks of life and levels of responsibility need to hear stories of individuals and communities that have their health improved by following the principles of Lifestyle Medicine.*

Keywords: ABLM; ACLM; lifestyle medicine, definition, lifestyle medicine global alliance

An epidemiologist by the name of Ernst Wynder was the first to use the phrase “Lifestyle Medicine” in a discussion of the effects of smoking on lung cancer risk around 1988, about 30 years ago. In 1989, he used it in a symposium title. Hans Diehl, the founder of the Coronary Health Improvement Project (CHIP), sought unsuccessfully to copyright the phrase in the United States around the same time. In 1999, James Rippe published the first text titled *Lifestyle Medicine* in the United States. In 2007, Gary Egger, A. Binns, and S. Rossner published *An Introduction to*

Lifestyle Medicine in Australia. As of January 1, 2018, there are 239 references to the phrase identifiable in PubMed.

Over the 30 years of its history, the phrase has become popular enough to be embraced by multiple entities including universities, numerous primary health care clinics, and others to refer to their own nuanced brand of non-allopathic medicine. Recently, I joined the newly formed Lifestyle Medicine Interest Group of the American Academy of Family Medicine and was interested to note a variety of uses of the phrase. At least one outspoken participant saw “Paleo” (low carbohydrate diet) as lifestyle medicine while others seemed to

Lifestyle Medicine (ACLM) to define its meaning clearly for physicians and the public. This cannot be done by fiat or legal maneuvering but must be accomplished through the medium of influence.

The challenge for ACLM is to standardize the definition of lifestyle medicine as “the use of evidence-based lifestyle therapeutic approaches, such as a predominately whole food, plant-based diet, physical activity, sleep, stress management, tobacco cessation, and other nondrug modalities, to prevent, treat, and, oftentimes, reverse the lifestyle-related chronic disease that’s all too prevalent.” While we are

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lean more toward an “alternative medicine” perspective.

The phrase is used by many individuals and groups to refer to a variety of concepts. So, to at least a degree, it is still a phrase needing a clear definition.

The meaning and understanding of many words change through time with usage. The same is true of the phrase “lifestyle medicine.” It is in the process of evolving within the medical, lay, and health-business communities. It is the desire of the American College of

still one voice among many, significant strides have been made within the past few years. Today, lifestyle medicine is the fastest-growing area of medicine, and it is gaining visibility and credibility.

Last year a large number of ACLM members sat for and passed the exam prepared by the American Board of Lifestyle Medicine (ABLM). The coordinated synthesis of this body of knowledge for both the testing and the board review materials required a

DOI: 10.1177/1559827618759992. From the Centre for Family Medicine, Winter Park, Florida. Address correspondence to: George E. Guthrie, MD, MPH, CDE, Centre for Family Medicine, 133 Benmore, Suite 200, Winter Park, FL 32792; e-mail: gguthrie@lifestylemedicine.org.

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significant level of funding, commitment, and effort. A large debt of gratitude is owed to those who put their hearts and minds to the task of putting these together, as well as to those who sat for the first board exam. Together these all gave a significant boost to the ACLM definition of lifestyle medicine. This corpus of evidence-based testing material along with the Core Curriculum and board review materials are becoming the national and even international standard for lifestyle medicine education and practice.

ACLM continues to define lifestyle medicine for the country and the world. The Lifestyle Medicine Global Alliance is helping define lifestyle medicine for the rest of the world as those from other parts of the world with similar vision join with us and receive assistance and direction in setting up and leading their own professional societies.

This is an advantage that ACLM does not want to waste. This year we will be focusing on bringing the ACLM definition into the consciousness of the medical community as well as that of the greater public. Having a Lifestyle Medicine Speakers Bureau to speak to the medical

community will help. A growing marketing campaign will ensure that community and government leaders are aware of the importance of lifestyle medicine. The growth of our Story Project will speak to the emotions of the public in such a way as to foster the growing understanding that pharmacotechnology, as good as it is, is not the most effective way to deal with chronic lifestyle-related diseases.

You as ACLM members can help facilitate this process. Use the standard ACLM definition. Make your medical and lay communities aware of the advances and activities of the ACLM professional society. Let your health system and community know that ABLM boarding now exists. With the permission of those patients experiencing the benefits of lifestyle treatments, tell (or have us tell) their stories. Be active in ACLM as much as possible, supporting our committees and activities.

And certainly, you can think of more ways to facilitate these changes. Do what you can and share your successes with others.

Together we are defining lifestyle medicine for our culture. It is noble work. Together we are changing the

world of medicine, bringing cost-effective solutions to problems that appear to many as unsolvable. Together we are making the world a better and more hopeful place.

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Trial Registration

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