

# Integrating Lifestyle Medicine for Sustainable Health Promotion in Thailand

Mini Review

Volume 5 Issue 2- 2024

## Author Details

Phitaya Charupoonphol MD\* and Kanasap Tawatting  
 Department of Family Health, Mahidol University, Thailand

## \*Corresponding author

Phitaya Charupoonphol MD, Department of Family Health, Faculty of Public Health, Mahidol University, Thailand

## Article History

Received: July 20, 2024 Accepted: July 22, 2024 Published: July 22, 2024

**Keywords:** Lifestyle Medicine, Sustainable, Thai society

## Situation of Thailand Health Status need New Approach

The World Health Organization (WHO) reports that non-communicable diseases (NCDs) cause 41 million deaths annually, accounting for 74% of all global deaths. Seventeen million people die prematurely from NCDs before the age of 70, with 86% of these premature deaths occurring in low- and middle-income countries. Cardiovascular diseases lead to the most NCD deaths annually (17.9 million), followed by cancer (9.3 million), chronic respiratory diseases (4.1 million), and diabetes (2.0 million), including diabetes-related kidney disease. More than 80% of all premature NCD deaths are attributed to unhealthy behaviors and lifestyles, such as tobacco use, physical inactivity, alcohol consumption, unhealthy diets, and air pollution [1-3].

Thailand's Ministry of Public Health has developed a plan to achieve Sustainable Development Goal 3 (SDG 3), ensuring healthy lives and promoting well-being for all at all ages. This aligns with the WHO's sustainable development agenda, addressing NCDs as a significant challenge. The WHO's Global Action Plan for the Prevention and Control of NCDs aims to reduce premature deaths from NCDs by one-third through health promotion, disease prevention, and treatment by 2030 [4,5]. In Thailand, over 14 million people suffer from NCDs, with cardiovascular diseases, cancer, and diabetes being the leading causes of death. Fourteen million Thais are currently dealing with NCDs, with the number projected to rise to 5.3 million by 2040. Factors contributing to this increase include unhealthy eating habits, consumption of sugary drinks, insufficient intake of fruits and vegetables, and lifestyle differences among socio-economic groups. For example, higher-income groups tend to consume high-fat foods and sugary drinks, while lower-income groups consume more processed and instant foods. Additionally, fewer children aged 6-14 in Bangkok consume adequate fruits and vegetables.

The Department of Mental Health reports that 40% of Thais suffer from sleep problems, with 20% of those aged 60 and above experiencing insomnia, leading to daytime fatigue, stress, poor concentration, and memory issues. Appropriate sleep duration varies by age, with adults needing 7-9 hours of quality sleep per night for optimal health, including the secretion of growth hormone. Alcohol consumption patterns in Thailand show the highest rates in the northern and

northeastern regions, with 33.1% and 32.3% of residents consuming alcohol, respectively, compared to the national average of 28.0%. Heavy drinking is most prevalent in the central region and Bangkok, with rates of 16.6% and 16.5%, respectively [6-10].

Physical activity levels among Thais are below the targets set by the Physical Activity Promotion Plan (2018-2030), exacerbated by the COVID-19 pandemic and lockdown measures, which reduced activity levels across all age groups. Women engage in less physical activity than men across all age groups. Mental health management remains an issue, with a suicide rate of 7.4 per 100,000 people in 2021, particularly high among those aged 35-39 and increasing among those aged 65 and above. Environmental factors, especially air pollution, also negatively impact health. Residents of the northern region are exposed to higher levels of PM2.5, correlating with higher lung cancer mortality rates (25.6 per 100,000 people) than other regions. Additionally, road accidents claimed 16,957 lives in 2021, with a mortality rate of 25.9 per 100,000, higher than the global average of 16.7 per 100,000. Most victims are male, aged 15-24, and motorcyclists, particularly in the eastern provinces of Rayong, Chonburi, and Chanthaburi.

Positive relationships, community engagement, and social support are crucial for health, with family structures impacting health behaviors. Single-person households exhibit higher rates of alcohol consumption, smoking, and gambling than other family types, at rates of 12.3%, 10.1%, and 10.0%, respectively. Children and adolescents with parents or guardians tend to consume more fruits and vegetables. In 2022, adolescents living alone or without guardians consumed fewer fruits and vegetables than those living with parents or guardians [11,12].

## Role of Lifestyles Medicine and Pilot Study

Lifestyle Medicine is a branch of health care that has evidence. Emphasis is placed on disease prevention rather than treatment.

**The stakeholders and policy makers explore new approaches to solve the burden of health problems. The pilot study was done in terms of in-depth interview from stakeholders**

Proposing the concept of Lifestyles Medicine via academic study aims to elucidate the definition and components of Lifestyle Medicine and to propose guidelines for sustainable health promotion through this medical discipline. The study encompasses a comprehensive review



of pertinent literature and in-depth interviews with six prominent informants including senior executives from medical and public health educational institutions and former and current high-ranking officials from both public and private sectors engaged in health promotion, disease prevention, and treatment. The findings reveal that Lifestyle Medicine is an emerging field in Thailand characterized by six fundamental pillars:

- a. Nutrition and diet,
- b. Sleep health,
- c. Physical activity,
- d. Positive relationships,
- e. Emotional and mental well-being, and
- f. Environmental management.

The majority of interviewees concur that Lifestyle Medicine is a practical approach for health promotion in Thailand. It prioritizes patient-centered care, personalized health management, collaborative health decision-making, and ongoing support. Consequently, promoting health through Lifestyle Medicine with a focus on behavioral and lifestyle modifications such as balanced nutrition, quality sleep, regular physical activity, effective stress management, social support, and the involvement of family, community, and networks, along with the regulation of detrimental environmental factors.

This approach perhaps can foster sustainable health at the individual, familial, and societal levels. Adopting sustainable health promotion strategies through Lifestyle Medicine is pivotal in aiding Thailand to achieve Sustainable Development Goal 3, which aims to ensure healthy lives and promote well-being for all at all ages [13-19] Figure 1.



**Figure 1:** 6 Pillars of Lifestyle Medicine in Thai. Designed by Phitaya Charupoonphol and Kanasap Tawatting. (Source: The American College of Lifestyle Medicine: ACLM).

### Conclusion

Lifestyle Medicine, focusing on health promotion through behavior and lifestyle changes, plays a crucial role in preventing NCDs among

healthy populations and managing complications in patients. It emphasizes evidence-based recommendations tailored to individual lifestyles, aiming to gradually reduce unnecessary medication use and modify behaviors contributing to health problems.



## References

1. World Health Organization (2023) Noncommunicable diseases.
2. (2020) Global Burden of Disease Collaborative Network, Global Burden of Disease Study 2019 (GBD 2019) Results. Institute for Health Metrics and Evaluation – IHME.
3. (2013) Institute for Population and Social Research, Mahidol University (IPSR). Thai Health Report 2566. 1st edn. Bangkok: Amarin Printing and Publishing Public Company Limited.
4. National Health Foundation, Institute for Population and Social Research, Mahidol University. Research Project on Thai Vegetable and Fruit Consumption Status. Bangkok.
5. (2024) Department of Mental Health, Ministry of Public Health. Health, good sleep-in working age.
6. Health Promotion Fund Support Office (2013) Insomnia... A problem that should not be overlooked. One of the problems that undermine the health and quality of life of Thais.
7. National Statistical Office (2021) Survey of population health behaviors, 2564.
8. (2021) Suicide Prevention Center, Khon Kaen Ratchanakarin Hospital. Suicide report successfully completed from death certificates 2012-2021.
9. (2021) Department of Pollution Control, Ministry of Natural Resources and Environment. Thailand's pollution situation reports 2021.
10. (2021) Injury Data Intelligence Center, Department of Disease Control, Ministry of Public Health. Deaths from road traffic accidents 2011-2021.
11. (2020) Institute for Population and Social Research, Mahidol University. Survey on family warmth promotion and organizational employees 2020.
12. (2023) Center for Child and Family Policy Knowledge. Survey of Thai youth, 2023.
13. (2024) United Nations Thailand. Sustainable Development Goal 3: Good Health and Well-Being.
14. (2024) World Health Organization. SDG Target 3,4 non-communicable diseases and mental health.
15. (2024) United Nations. Ensure healthy lives and promote well-being for all at all ages.
16. Chen S, Kuhn M, Prettner K, Bloom DE, Wang C (2021) Macro-level efficiency of health expenditure: Estimates for 15 major economies. *Social Science & Medicine* 287.
17. Macassa G (2021) Can sustainable health behavior contribute to ensure healthy lives and wellbeing for all at all ages (SDG 3)? A viewpoint. *Journal of public health research* 10(3): 2051.
18. Lianov L, Johnson M (2010) Physician competencies for prescribing lifestyle medicine. *JAMA* 304(2): 202-203.
19. (2021) Institute of Nutrition, Department of Health, Ministry of Public Health. Curriculum and training criteria for general practitioners for a certificate of knowledge and expertise in preventive medicine (lifestyle medicine).

