

## InspireHealth: Engaging cancer patients in health

InspireHealth aims to engage patients in their cancer treatment with the goal of improving survival and reducing recurrence.

Hal Gunn, MD

**T**here is growing evidence that engaging patients in simple and inexpensive ways to support their own health can have a significant impact on outcomes in diseases such as cardiovascular disease, diabetes, and cancer. A growing body of evidence suggests that engaging cancer patients in their health (i.e., exercise, healthful nutrition, stress reduction, emotional support, etc.) can substantially improve quality of life, reduce the risk of recurrence, improve survival, and reduce overall health care costs. Integrated with standard cancer treatments, such programs empower patients to take ownership of their own health and play an active role in their treatment while simultaneously improving their survival and reducing the risk of cancer recurrence. The result is a higher quality of life with a reduced financial and social burden to patients, families, communities, and taxpayers. The greatest untapped resource in our health care system is our patients.

Integrated with standard cancer treatment, emerging evidence suggests that support of health may be as impor-

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Dr Gunn is co-founder and CEO of InspireHealth. He supports the health of patients with cancer, and has a clinical faculty appointment in the Department of Family Practice at the University of British Columbia.

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tant as standard cancer treatment in reducing risk of recurrence and improving survival. Some examples:

- Exercise is associated with a 20% to 50% reduction in breast cancer recurrence and death from the disease.<sup>1</sup>
- Exercise is associated with a 50% to 60% reduction in cancer mortality in patients with colon cancer.<sup>2,3</sup>
- In a large-scale randomized control trial, a low-fat diet combined with modest weight loss was found to reduce breast cancer recurrence by 24%.<sup>4</sup>
- An RCT found that a program of health engagement (exercise, meditation, vegetarian diet) may affect the progression of early, low-grade prostate cancer.<sup>5</sup>
- Consumption of less meat, fat, refined grains, and sugar is associated with a substantial reduction (70%) in recurrence and increased survival in patients diagnosed with colon cancer.<sup>6</sup>

At InspireHealth, our physicians, nutritionists, exercise therapists, and counselors guide and empower cancer patients to integrate patient-centred health engagement into the excellent cancer treatment provided by the BC Cancer Agency. A not-for-profit society, InspireHealth is Canada's leader in patient-centred programs that inspire, empower, and engage cancer patients in their own health. The Samueli Institute ([www.samueliinstitute.org](http://www.samueliinstitute.org)), a leading US health care research organization, has identified InspireHealth as a leading example of patient-centred medicine and an optimal heal-

ing environment. The Samueli Institute recently received a \$2.2 million research grant to study InspireHealth's programs as a model of patient-centred medicine and their impact on patient empowerment, self-efficacy, sustained healthful lifestyle change, and survival.

We all become ill at some point in our lives—it is a shared human experience. When the specifics of the treatments prescribed by our doctor fade from our memory, what remains are our physician's kind words of compassion, the warm support that helped us face our fear of the unknown, and their hand on our shoulder in assurance that everything was going to be okay—these are the moments that have the most meaning for us. Our relationship with our patients is as important as the treatments we prescribe. It is in this experience, this shared human experience, where healing occurs—it is broader and as important as physical healing, although the two can be linked in important ways. It is this shared human experience that brings meaning to our work, to the illness experience, and to the lives of our patients; an experience through which we support healing by empowering and engaging patients in their health.

Information alone is rarely sufficient to create lasting healthful lifestyle change. Most of us know that exercise and eating lots of fruits and vegetables is good for us and that smoking is not, but only 5% of cancer

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patients meet the minimal healthy lifestyle recommendations for healthy diet, exercise, and smoking in spite of the growing body of evidence of the importance of health engagement.<sup>7</sup> When we, as physicians, tell patients about the importance of eating healthfully, exercising, and smoking cessation, it rarely has the intended long-term effect. When we empower, engage, and inspire patients, lasting lifestyle changes can occur.

A diagnosis of cancer, as challenging as it is, provides a window of opportunity for significant lifestyle change. If supported in the right way, the fear associated with a cancer diagnosis can be transformed into inspired engagement in health. One of the most important shifts a patient can make in their healing journey—perhaps the most important shift—is to release patterns that limit their full love and support of themselves. Such shifts occur not as a result of information (although inspiring information is a helpful adjunct), but because of a healing shift to embrace and fully support their own health, happiness, and healing. This is an important frontier of medicine—to optimally engage our patients in their own health. At this frontier, we discover that the best way to facilitate healing in others (and thus, their engagement in their health) is to engage in our own healing and model health and well-being.

Healing is a shared experience. When we are in a compassionate relationship with a patient and something shifts in their heart (e.g., forgiveness or acceptance), it is shifting in ours—it is a mutual experience that is healing for both of us. It is these moments that are the meaning of medicine, bringing meaning to our lives and to the lives of our patients. In this experience, we heal as we facilitate healing in others—we are not, in that moment, doctor and patient, we are co-creators of an experience that is healing and beneficial to both of us. In this mo-

ment, as our hearts open, each of us experiences the shift that supports our own healing.

While physicians have responsibility for treatment, we cannot take responsibility for someone else's healing. The deeper we journey in our own healing, the better able we are to facilitate healing in others—not because we are taking responsibility for heal-

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ing others, but because we are taking responsibility for our own healing. If we understand the paradoxical nature of our responsibility for healing, we are able to take full joyous responsibility for supporting our own health, happiness, and healing and release any sense of guilt or responsibility for our patient's healing. In so doing, we are free to fully connect in compassion and human connection with our patients.

Cancer patients are at substantially higher risk than the general population for developing a second cancer and other illnesses including diabetes,<sup>8</sup> cardiovascular disease,<sup>8</sup> obesity,<sup>9</sup> and osteoporosis.<sup>10</sup> Cancer patients commonly report emotional distress, fatigue, reduced energy, and loss of stamina.<sup>11</sup> The incidence and impact of many of these health conditions can be reduced through healthful lifestyle changes, including exercise, healthful nutrition, weight management, and smoking cessation. Exercise and healthful eating reduce the risk of all chronic diseases (e.g., cancer, heart disease, diabetes, strokes, arthritis, etc.). During cancer treatment, regular mild-to-moderate exercise has been

shown to improve well-being, increase energy, boost self-confidence, lessen anxiety and depression, stimulate immune system function, and improve appetite and sleep patterns.<sup>12</sup> Similarly, healthful foods also support our health and well-being. The ability for the body to heal is intimately related to how we nourish it.

Along with the evidence that healthful lifestyle changes can substantially reduce the risk of recurrence and improve survival of people with cancer (and thus, substantially reduce overall health care costs), growing evidence exists that this integrative approach to supporting health during cancer treatment has substantial benefits in reducing overall costs in other important ways. Poorly adjusted cancer patients consume 130% more medical services, including 130% more hospital days, than well-adjusted patients. Even those who are fairly adjusted consume 80% more medical services than well-adjusted patients, including twice as many hospital days, as well-adjusted patients.<sup>13</sup>

This has substantial financial implications, since high distress levels are common among people living with cancer. In a recent study of over 3000 cancer patients throughout Canada, 37% of participants met the criteria for significant distress. Another study of 386 patients from 12 US medical centres found that 35% of patients had psychological distress and an even larger study, consisting of 4496 cancer patients, demonstrated a 35% overall rate of significant distress.<sup>14</sup>

Programs to support the psychological and emotional well-being of cancer patients have been found to substantially decrease the average length of hospital stays by 78%, decrease hospitalization frequency by 67%, and reduce emergency room visits by 45%.<sup>15</sup> The potential cost-savings achieved by such a simple inexpensive intervention is significant.

There is a strong positive association between the number of lifestyle

recommendations being met and the quality of life of breast, prostate, colorectal, bladder, uterine, and skin cancer patients<sup>7</sup> and these benefits have substantial health care cost implications. Cancer patients who experience fatigue report 50% more emergency room visits and 400% more visits to physicians and clinics.<sup>16</sup> Malnourished patients experience almost twice the average length of stay in hospital when compared to normally nourished equivalents.<sup>17</sup> Cancer patients who receive nutritional counseling are able to maintain their energy intake and reduce the incidence of fatigue.<sup>18</sup> Through simple approaches to support health—including healthful nutrition, exercise, and emotional and spiritual support—the incidence and severity of these symptoms (and their associated health care cost impact) can be significantly reduced.

At InspireHealth, our eight physicians and other health professionals on staff provide a patient-centred environment that helps transform the fear of a cancer diagnosis into inspired engagement in health. Our programs, which include a 2-day LIFE program, healthful nutrition classes, exercise therapy classes, shared learning groups, yoga, meditation, and stress reduction classes, are all designed to empower and engage, often in a group setting in which patients can inspire and learn from each other. Our physicians, on salary through funding from MSP/PHSA, co-create an individualized health plan with the patient designed to optimally engage health.

Unpublished, non-peer reviewed retrospective studies of all InspireHealth patients with stage 4 colon cancer (121 patients), stage 3B and 4 lung cancer (122 patients), and stage 4 breast cancer (119 patients) treated over an 8-year period at InspireHealth, found that attendance at InspireHealth was associated with significantly longer survival compared to BC cancer registry statistics. For example, 53% of InspireHealth inoperable lung cancer

patients (i.e., stage 3B and 4) were alive 1 year after diagnosis, compared to just 20% or 23% of patients in the standard BC or SEER (US) survival curves for this disease during the same 8-year time period. At 3 years after diagnosis, 16% of InspireHealth patients with inoperable lung cancer were still alive, compared to only 4% and 5% in the BC and SEER standard survival curve, respectively. These retrospective studies are not randomized control trials and therefore the results must be interpreted as an association rather than definitive cause/effect. For example, as InspireHealth patients are self selected, they may be more highly motivated or distinct in some other way compared to other BC cancer patients. However, the growing body of evidence in the research literature documenting the association between healthful lifestyle and improved survival in cancer patients suggests that the results of these retrospective studies are promising. The upcoming Samuelli Institute prospective study will further our understanding.

With the growing body of evidence that health engagement plays an important role in a comprehensive cancer treatment strategy, the BC government has provided financial support for the expansion of InspireHealth throughout BC. InspireHealth Victoria opened in October 2011, to be followed by centres in Kelowna (September 2012), Prince George, and Abbotsford. In addition, a “virtual InspireHealth” has been created to provide programs to cancer patients and their families living in rural and remote BC communities. This visionary funding provided by the BC government marks the first time in the world that a government has provided funding to support access to integrative health programs for all cancer patients.

We welcome anyone who would like to know more about InspireHealth and our programs to visit our website ([www.inspirehealth.ca](http://www.inspirehealth.ca)) or to come to

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InspireHealth for a visit to learn about our innovative programs in patient-centred medicine and engagement in health.

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world's foremost authority on (and critic of) alternative medicine refers to the tendency of integrated medicine proponents to use the language of love as a euphemism for the delivery of questionable treatments: "They merely seem to hijack fundamental principles (e.g., holism, therapeutic relationship, patient-centred medicine, EBM) of any type of good health care ..."<sup>6</sup>

Physicians have long recognized that the needs of patients go beyond the boundaries of what randomized trials can offer. And while doctors are expected to deliver evidence-based care in a compassionate way, there are opportunities to accommodate patients' spiritual, philosophical, and cultural needs in a manner that does not involve making medical claims that can't be proved. For example, many hospitals have a chaplain service. Often a patient's sense of hope, control, and quality of life is enriched when such services are available. A key part of the bargain, however, is that we do not place those figures in charge of medical decisions. The ethical boundary is important if patients are to receive the best psychological support possible without compromising medical quality. Arguably this line is crossed in the realm of integrative medicine. In this realm, therapies such as homeopathy (long debunked by the scientific community) are offered to patients in a context defended as patient-centred or holistic. But here, the purveyors are either making medical claims or generating invoices (or both). The hope gained can come at many prices: financial cost, misinformation, and delay in seeking proper treatment. Compassionate care should also be ethical care.

Wellness has become big business. For physicians who struggle every day to provide quality care with limited resources, it can be disheartening to be the one providing real patient-centred care and prevention only to see the

public's trust diverted into fads that promise "optimum health" at a price.

The trend is particularly concerning to primary care physicians who are frequently the targets of claims by other groups that most, if not all, of their job could be done by others—including naturopaths.<sup>7</sup> Introducing alternative therapies onto the primary care landscape under the guise of patient-centred engagement will not enhance the effectiveness of care provided by medical doctors, nor will it strengthen their long-term position in the medical system.

Admittedly, we live in a libertarian society where, within limits, people have the freedom to make choices other than the most reasonable ones. This includes health care. But that does not mean that governments do not have a duty to protect other rights, such as truth in advertising, and to ensure that health care funds are spent wisely.

It is in the spirit of consumer protection and holding the government to account for spending tax dollars that we ask questions. We need to ask about decisions to direct scarce public resources to programs that offer unproven therapies and that imply that patients with serious diseases will live longer as a result. We hope to get forthright answers that address the scientific and ethical questions asked—not legal threats. Science should never be put under the gun.

The InspireHealth website is replete with messaging about empowerment, "healing journeys," engagement, and lifestyle changes. Such packaging is intuitively attractive, but it is what lies within the package<sup>8</sup> that generates scientific concerns. Why, for example, are patients being directed to "naturopathic oncology," intravenous hydrogen peroxide, homeopathic remedies, therapeutic touch, and a long list of highly dubious treatments? More troubling is the fact that patients incur charges for the provision of many of these modalities. Further questions