

Building resilience - the health footprint of a healthy doctor

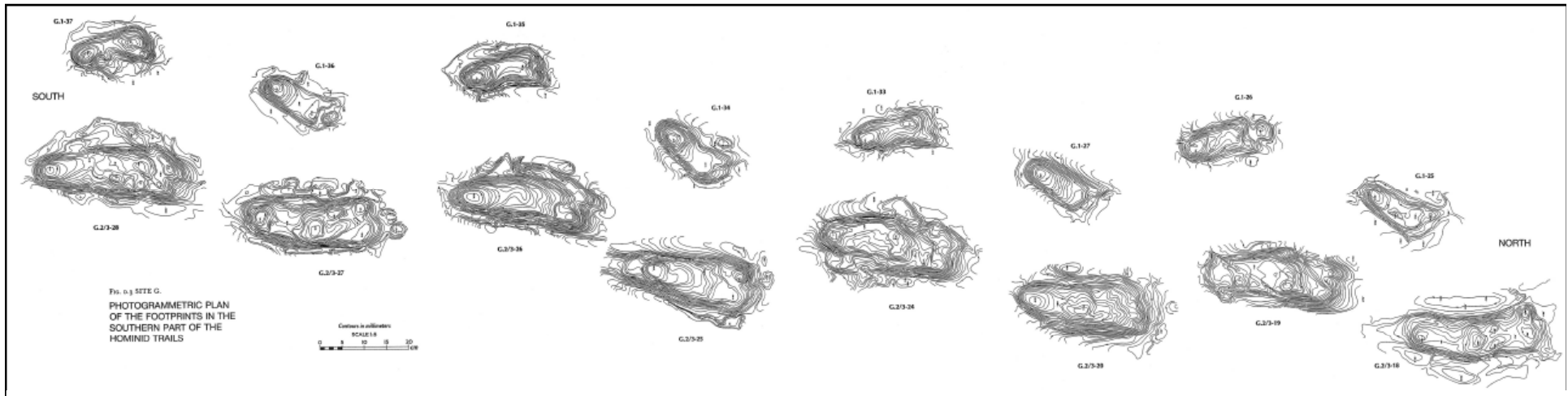
European Association for Physician Health 2015

Professor Peter Anderson, MD, MPH, PhD, FRCP

Institute of Health and Society, Newcastle University

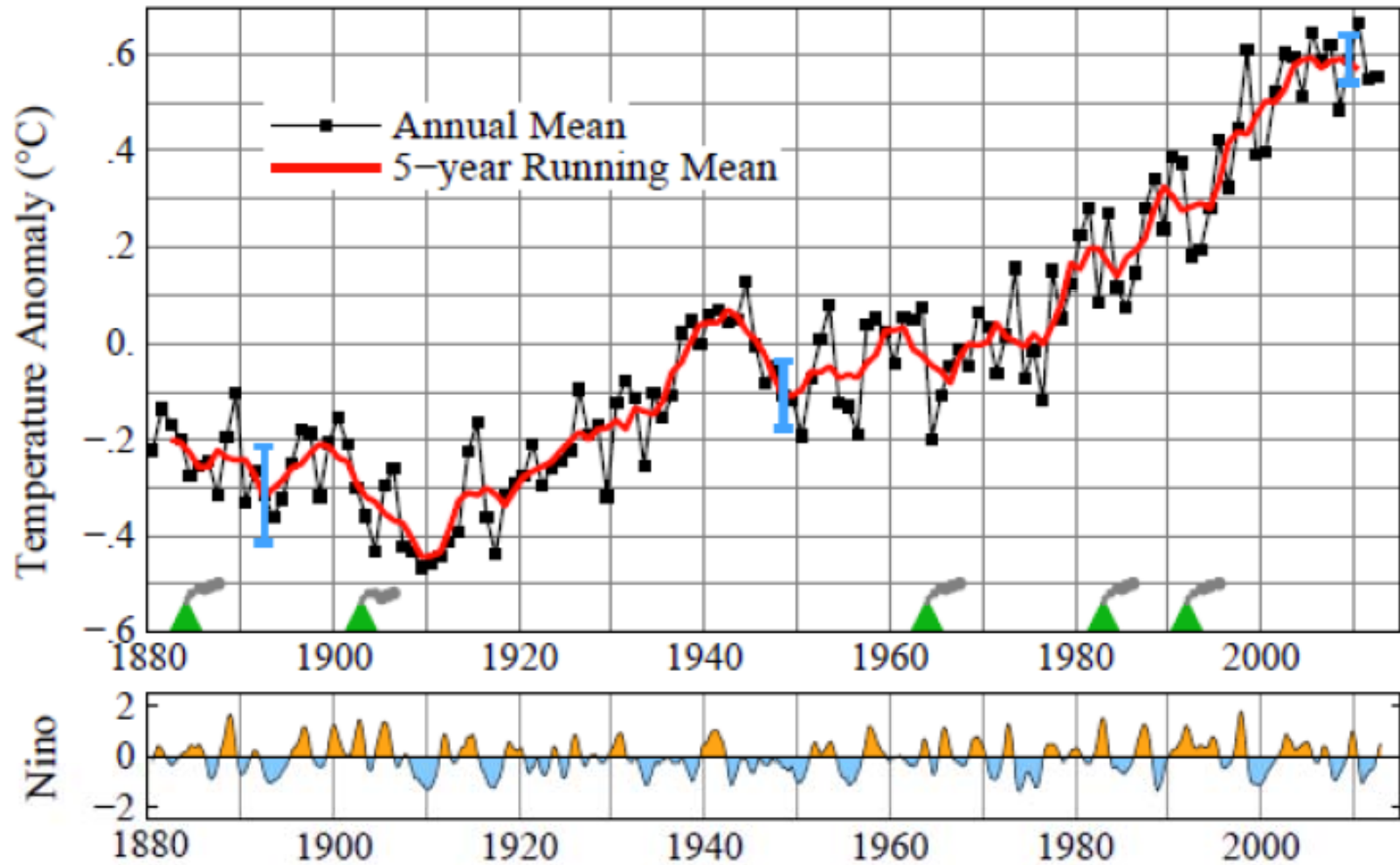
Faculty of Health, Medicine and Life Sciences, Maastricht University

Barcelona, 20 April 2015

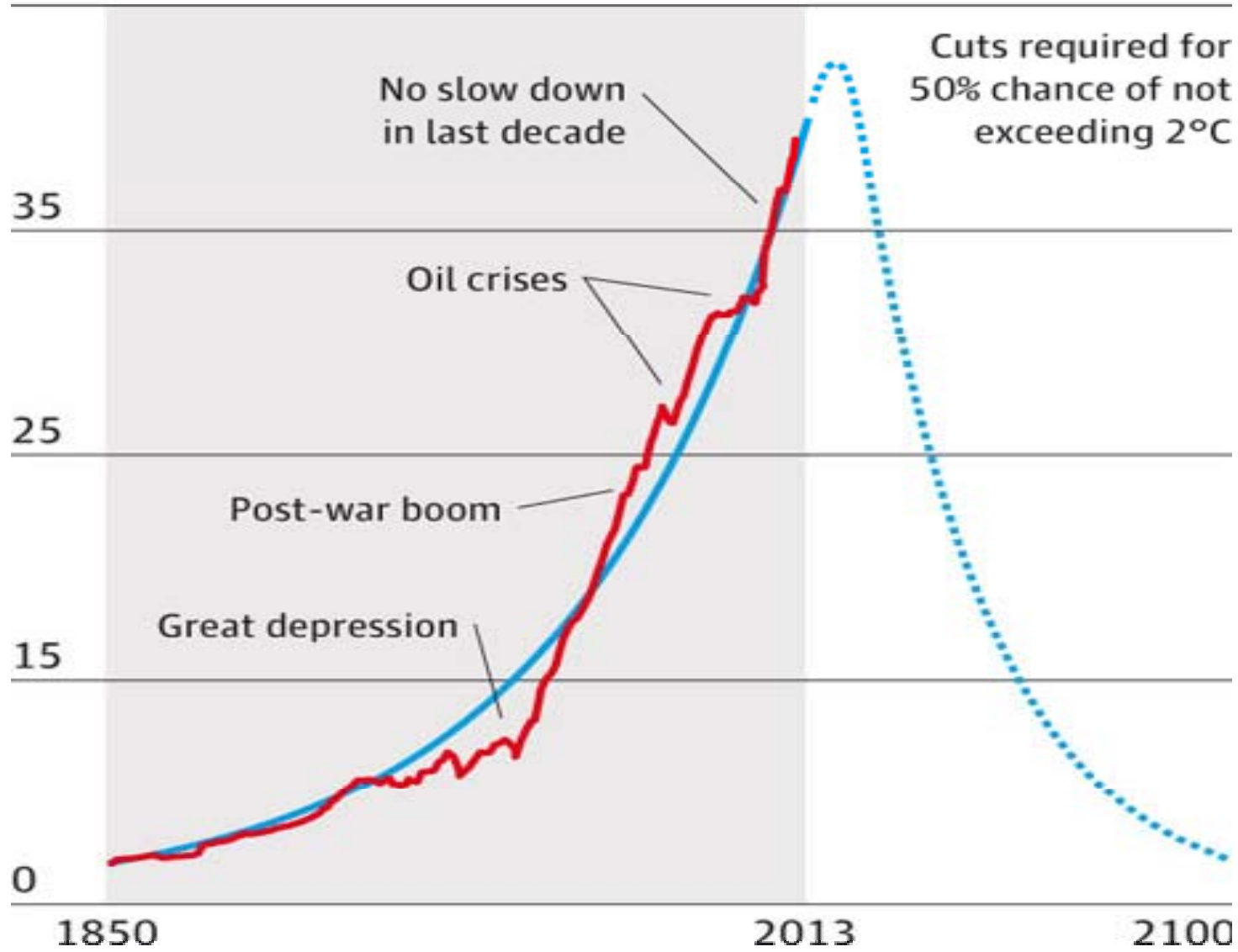




Global Land–Ocean Temperature



45 Billion tonnes of CO2



A beginner's guide to carbon footprinting

Carbon Management (2012) 3(1), 55–67



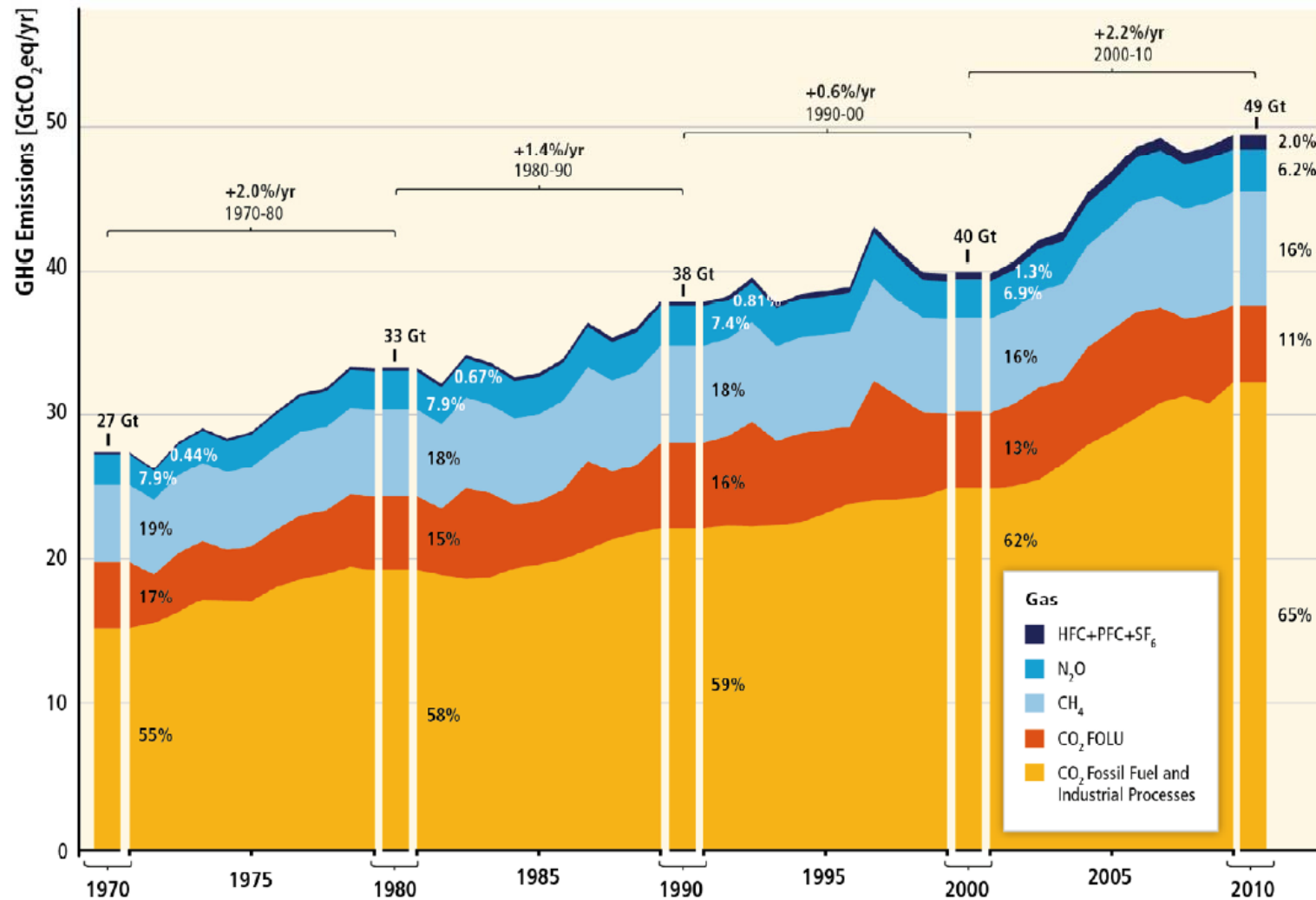
Ian Williams*, Simon Kemp, Jonathan Coello, David A Turner & Laurence A Wright

Carbon footprinting is one of the foremost methods available for quantifying anthropogenic environmental impacts and for helping tackle the threat of climate change. However, for any person undertaking a carbon footprinting analysis for the first time, they will almost certainly be struck by the broad array of definitions, approaches and terminology surrounding the field. This paper provides an introductory guide to some basic concepts in carbon footprinting for researchers and lay people interested in the area. Each stage of calculating a carbon footprint is considered and an introduction to the main methodologies is provided. The advantages and disadvantages of the various approaches are discussed and a rough framework of procedures is provided for the calculation of carbon footprints over a variety of subjects. Some general data sources are included and a glossary of key carbon footprinting terminology is available in supplementary data online.

A tool for climate change management

A carbon footprint is a measure of greenhouse gas emissions, [specifically carbon dioxide and methane, calibrated for CO₂ equivalent], produced by actions of an entity.

The central reason for estimating a carbon footprint is to help reduce the risk of climate change through enabling targeted reductions of greenhouse gas emissions.



A tool for climate change management

A carbon footprint:

- Promotes accountability
- Is an advocacy tool
- Monitors change

A tool for climate change management

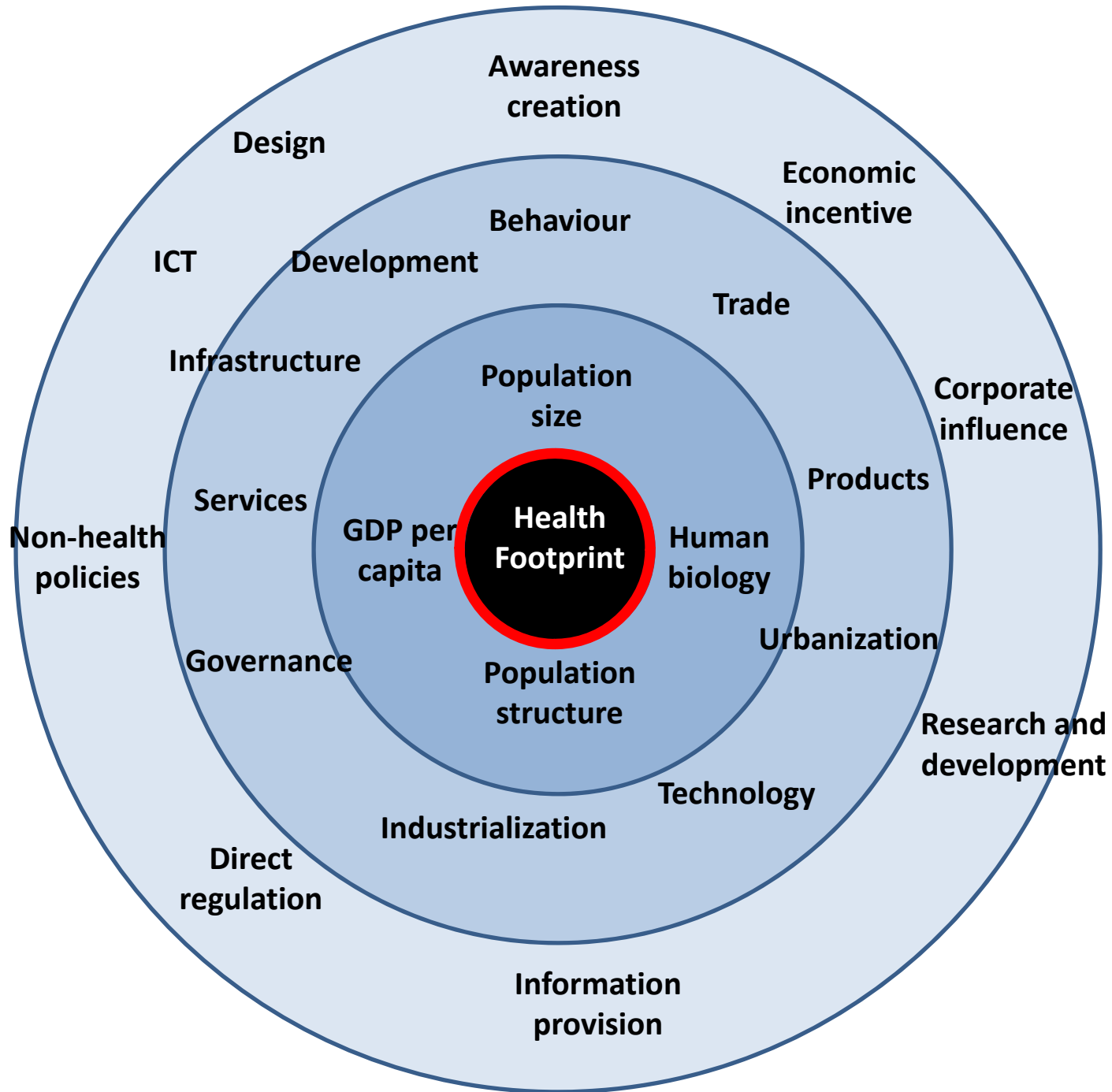
- Carbon footprints of nations, regions and cities
- Carbon footprints of sectors and organizations
- Carbon footprints of products and services
- Personal carbon footprints

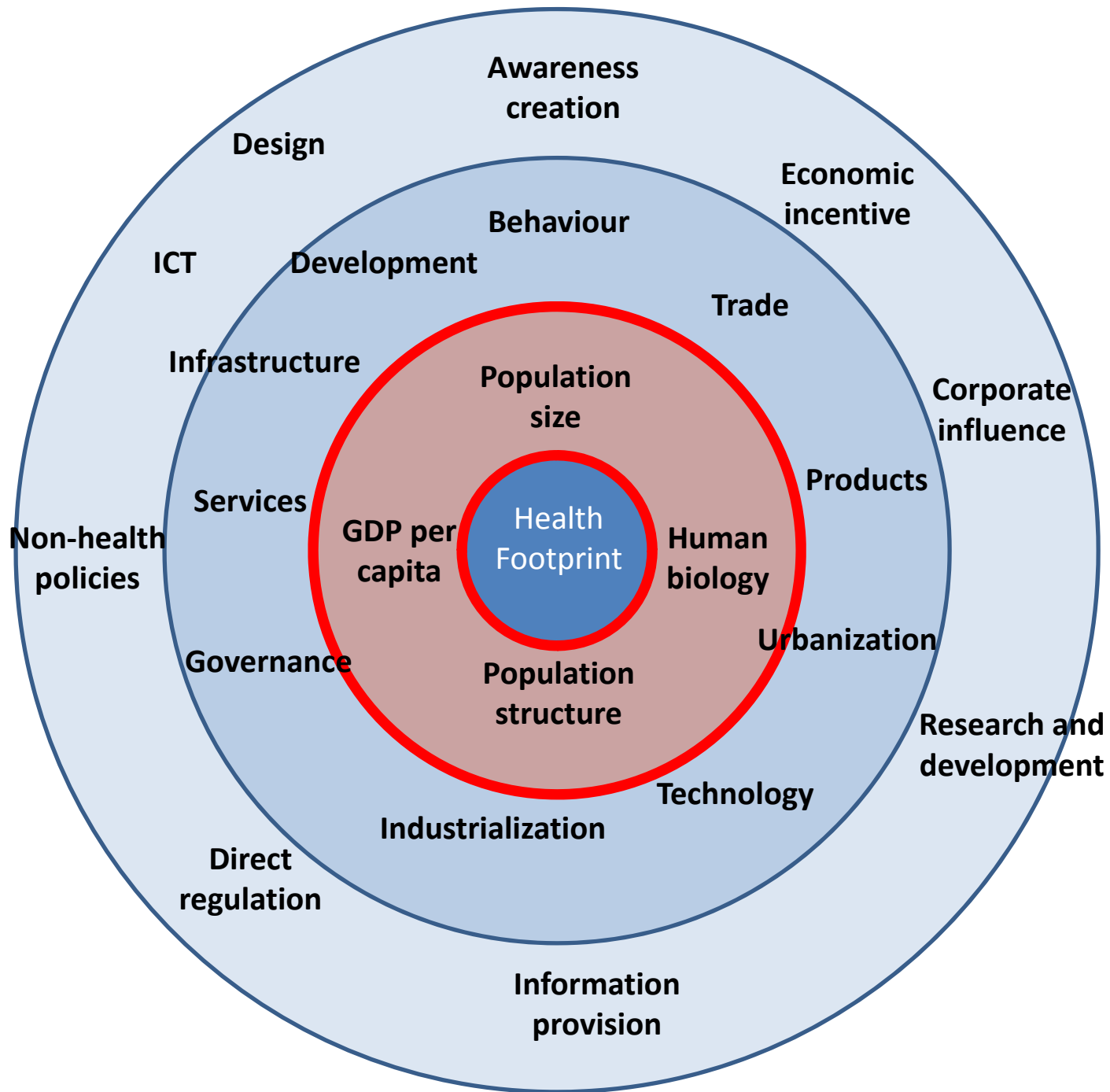
A tool for health governance

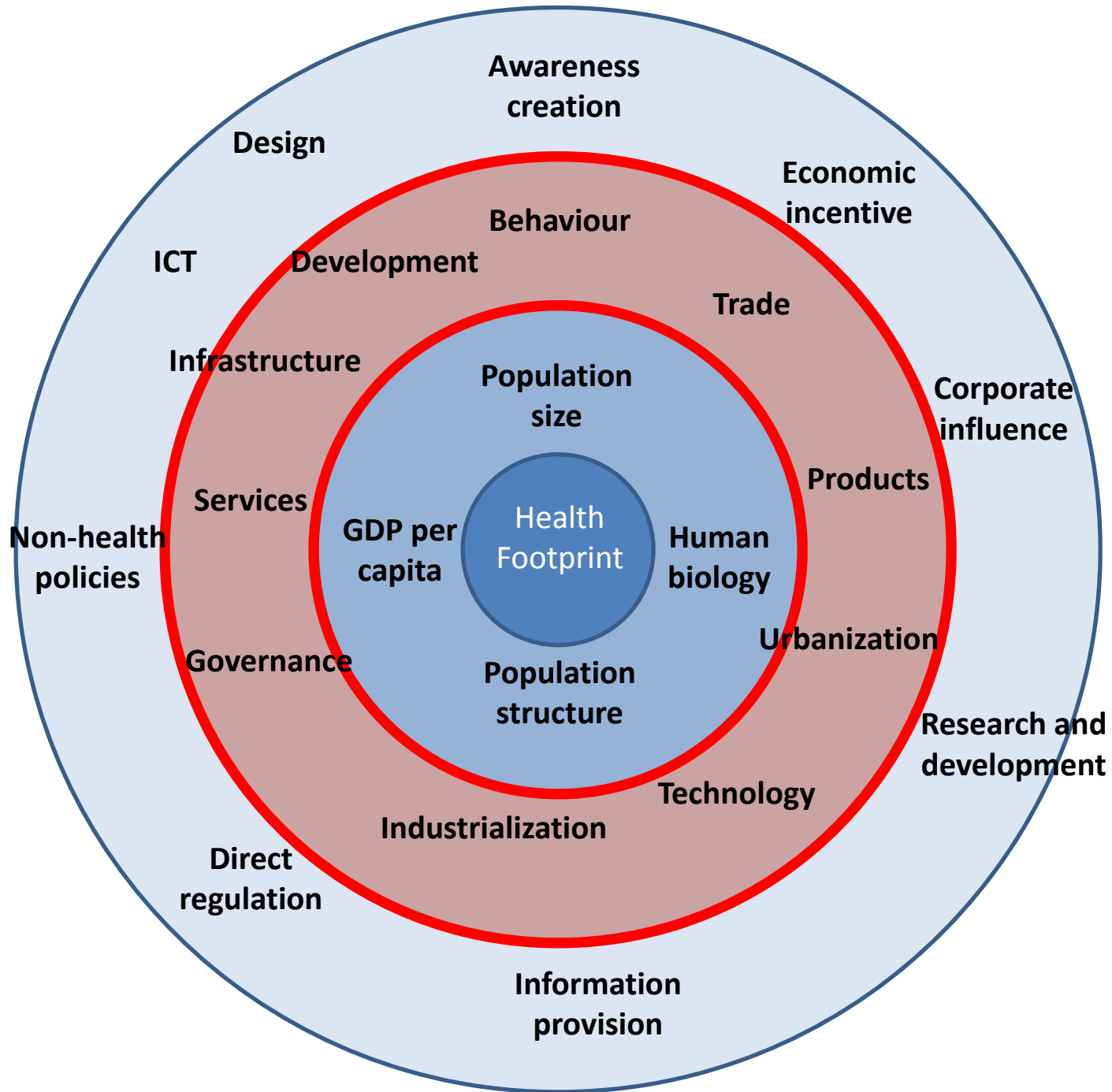
A health footprint is proposed as a measure of disability adjusted life years (DALYs) produced by actions of an entity.

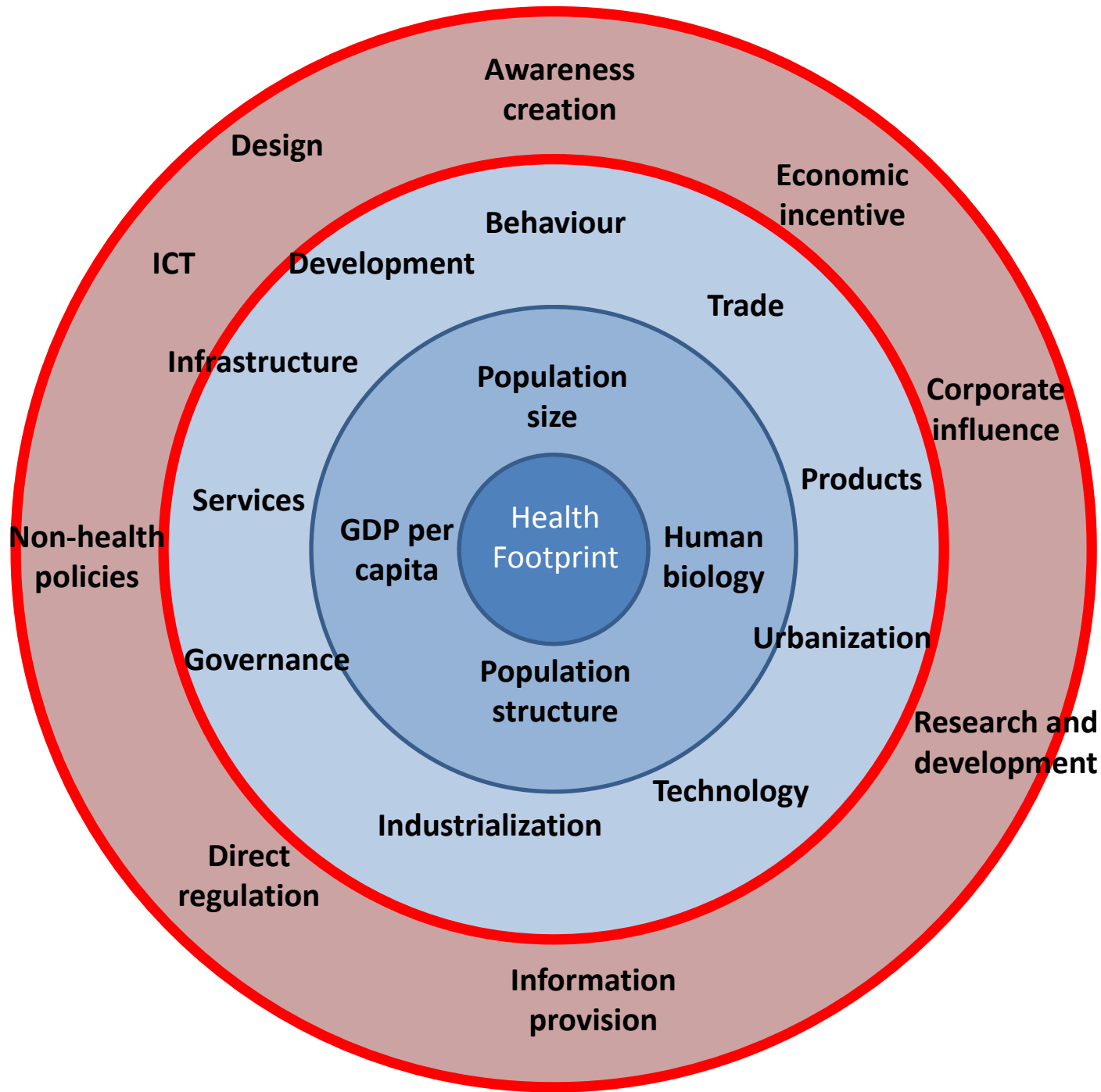
A health footprint:

- Footprints of nations, regions and cities
- Footprints of sectors and organizations
- Footprints of products and services
- Personal footprints

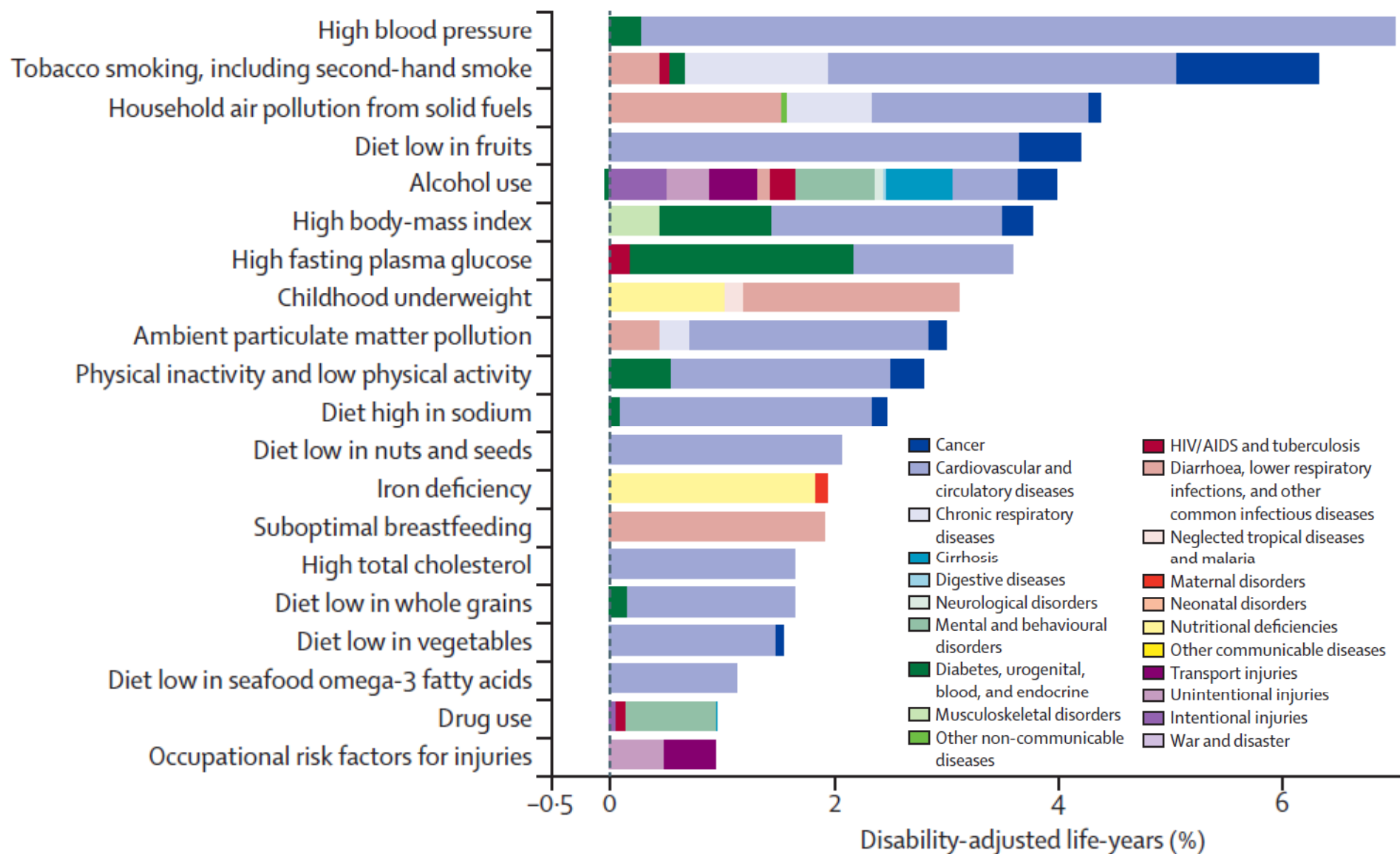




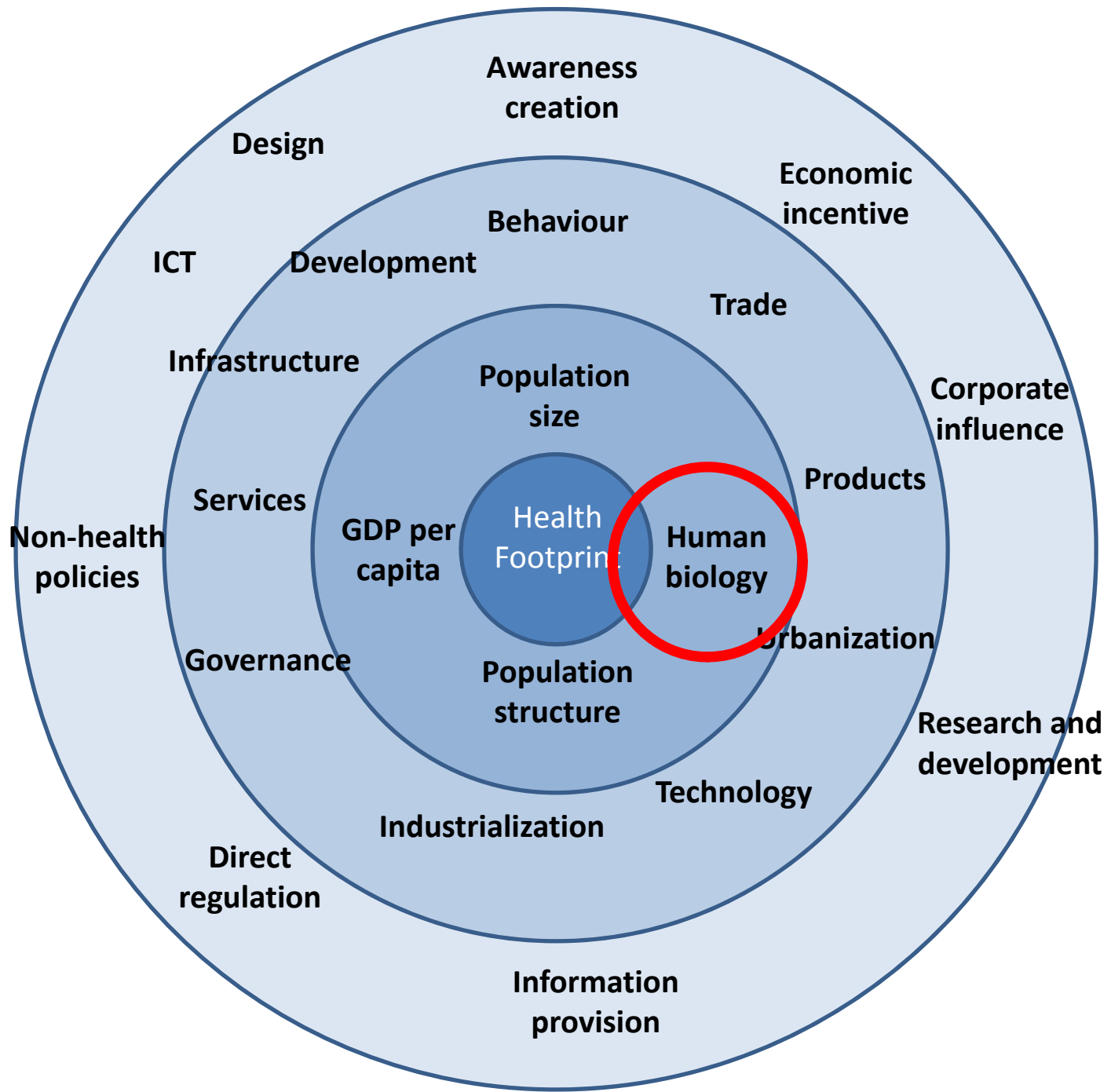




Risk factors for disability adjusted life years, world, 2010



Source: Lim et al 2012



Human evolution would suggest that we are

“active and functional”

in relation to the drugs that we take,
including alcohol and nicotine, rather than
being

“passive and vulnerable”

1. Co-evolution with nicotine, a plant toxin
2. Functional use of alcohol, as part of a fruit-eating diet

In the story of life over the last 400 million years, one of the main plot lines has been the battle between plants, and the animals that eat them.

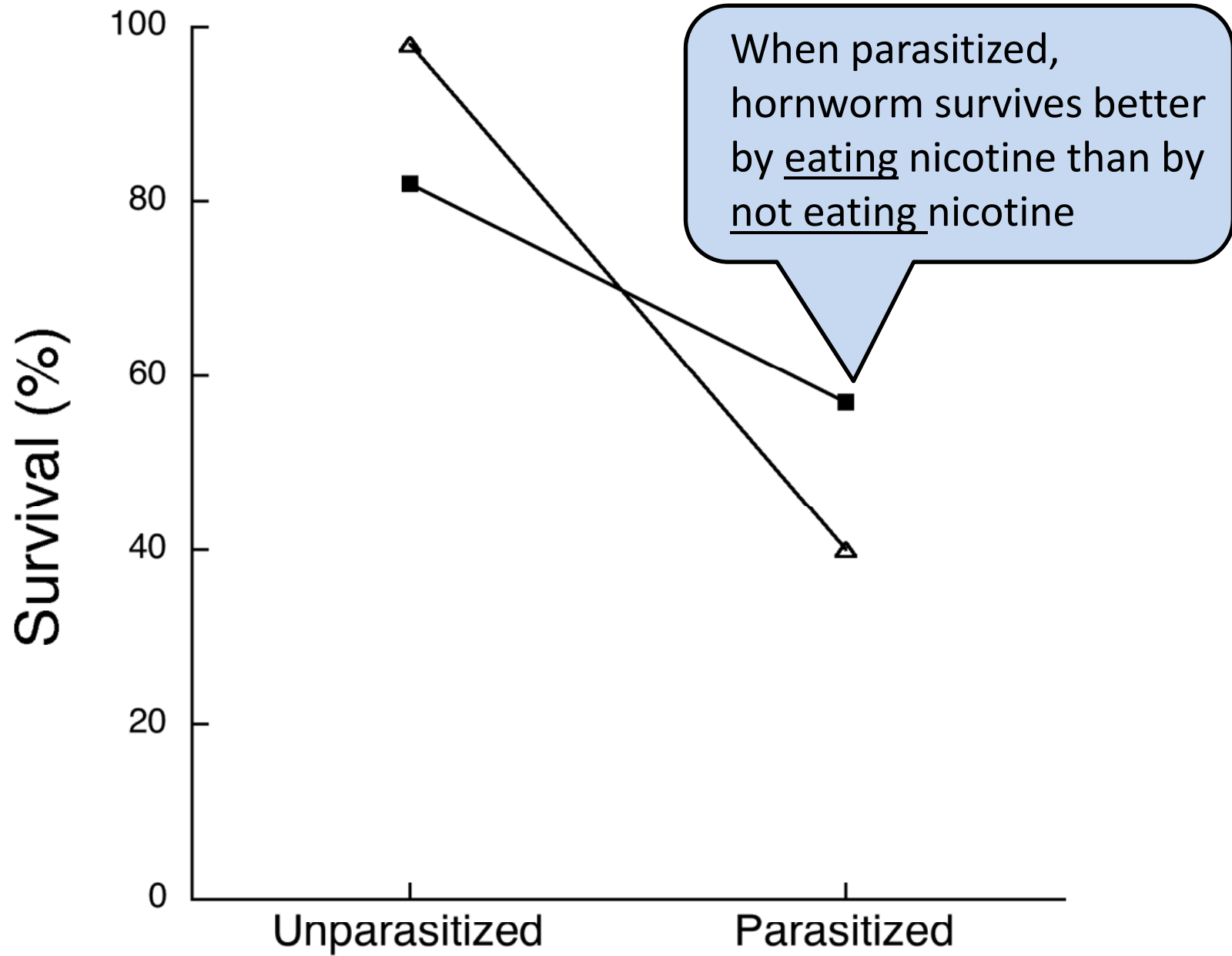


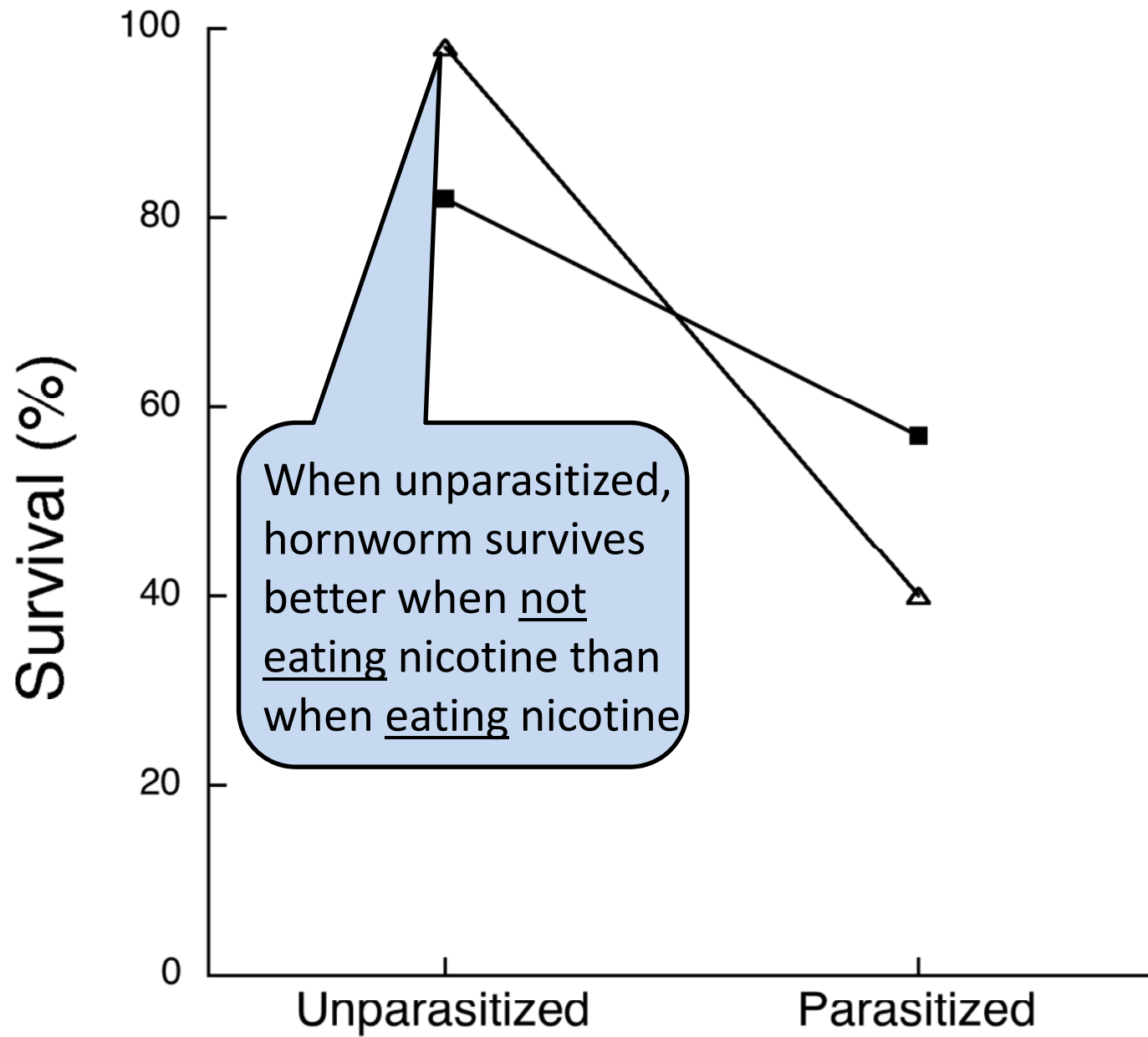
Of many defense mechanisms, plants produce secondary metabolites, including nicotine, morphine, and cocaine, potent neurotoxins that evolved because they punished and deterred consumption by plant-eating animals

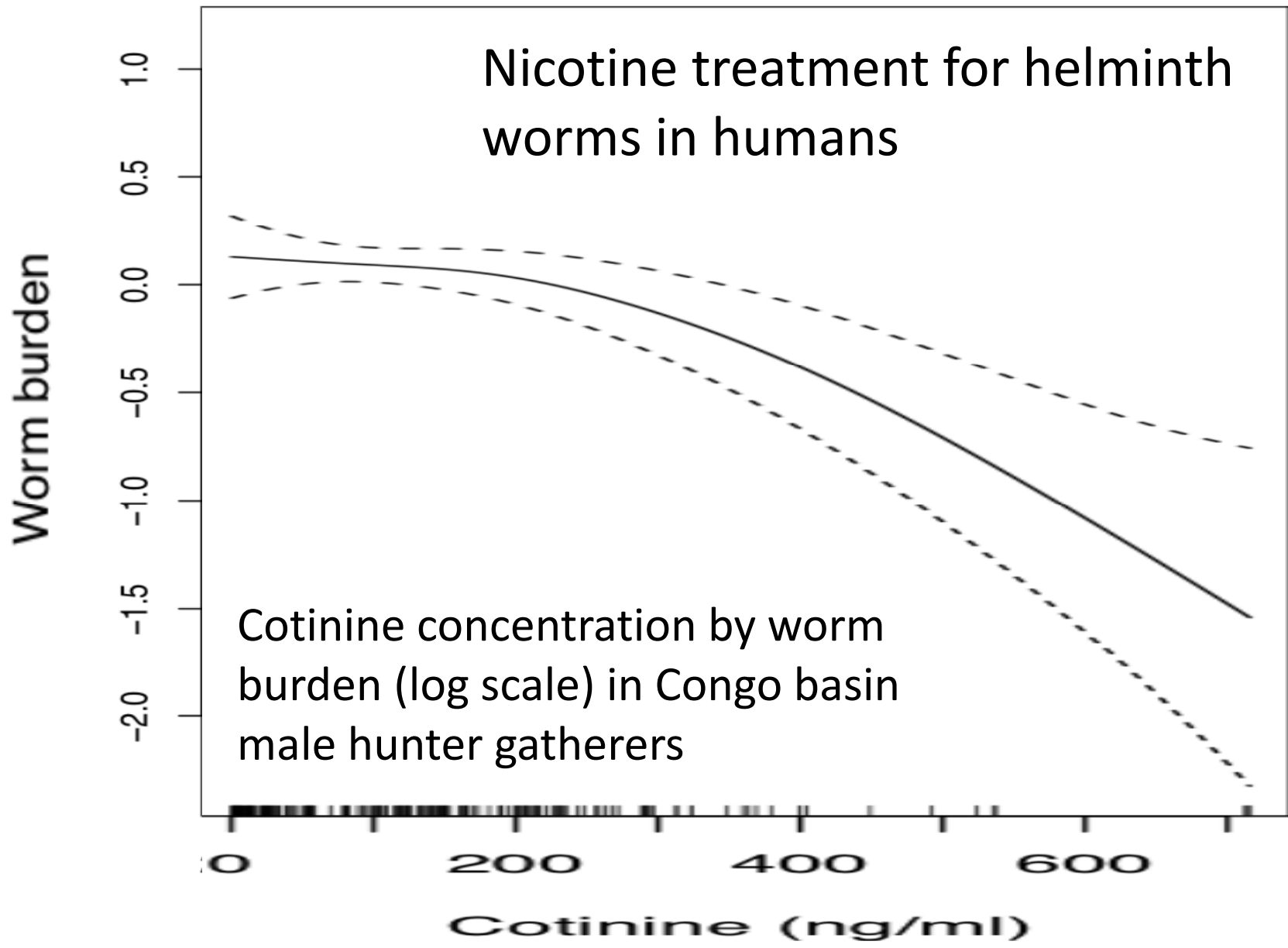
To inhibit and kill their own parasites, animals have evolved to counter-exploit the products of hundreds of millions of years of "research" by plants by subsisting on a mixed diet of palatable and toxic plants, trading off diet quality (and thus growth) for what is termed *enemy-reduced* or *enemy-free* space.

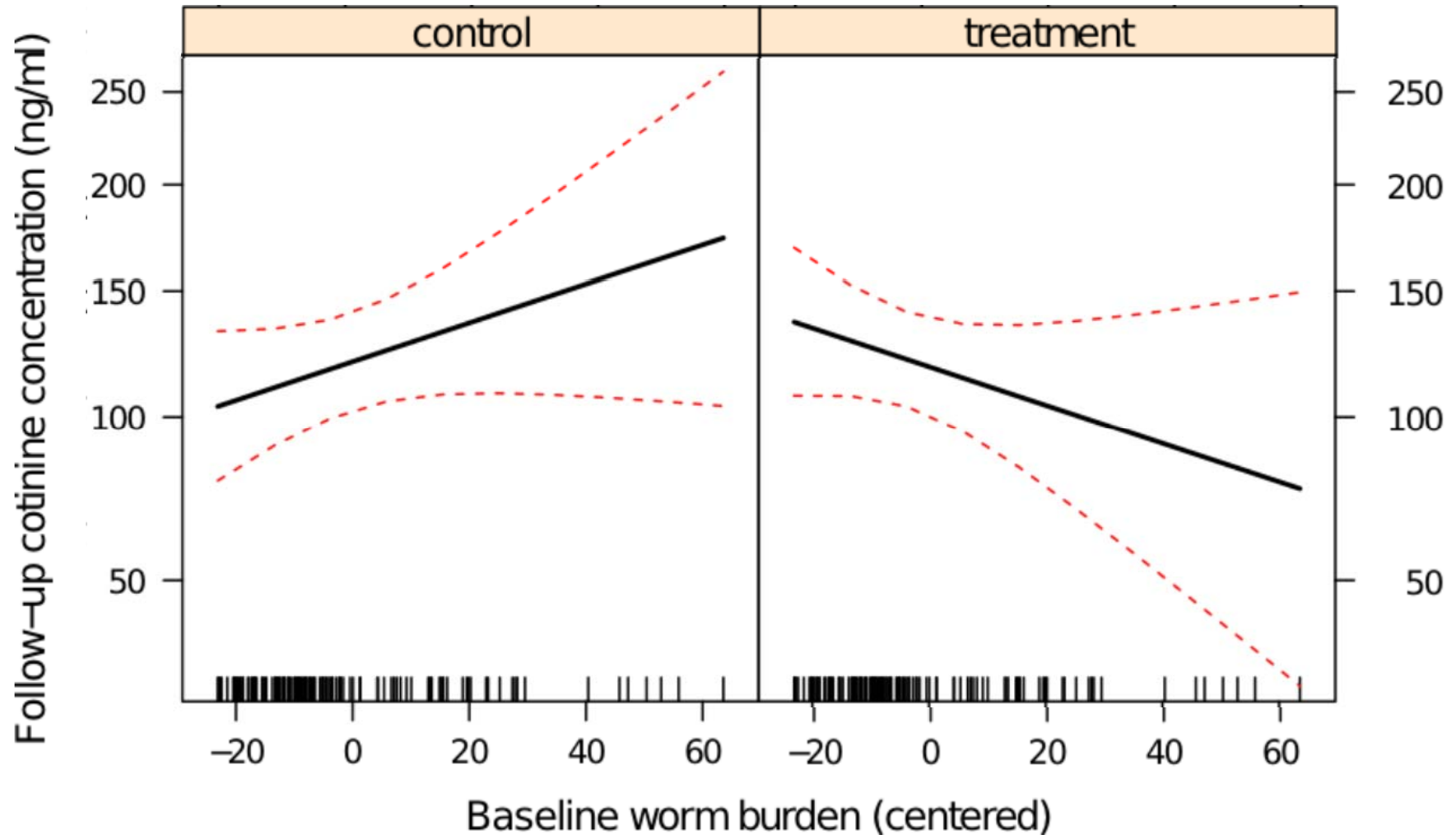






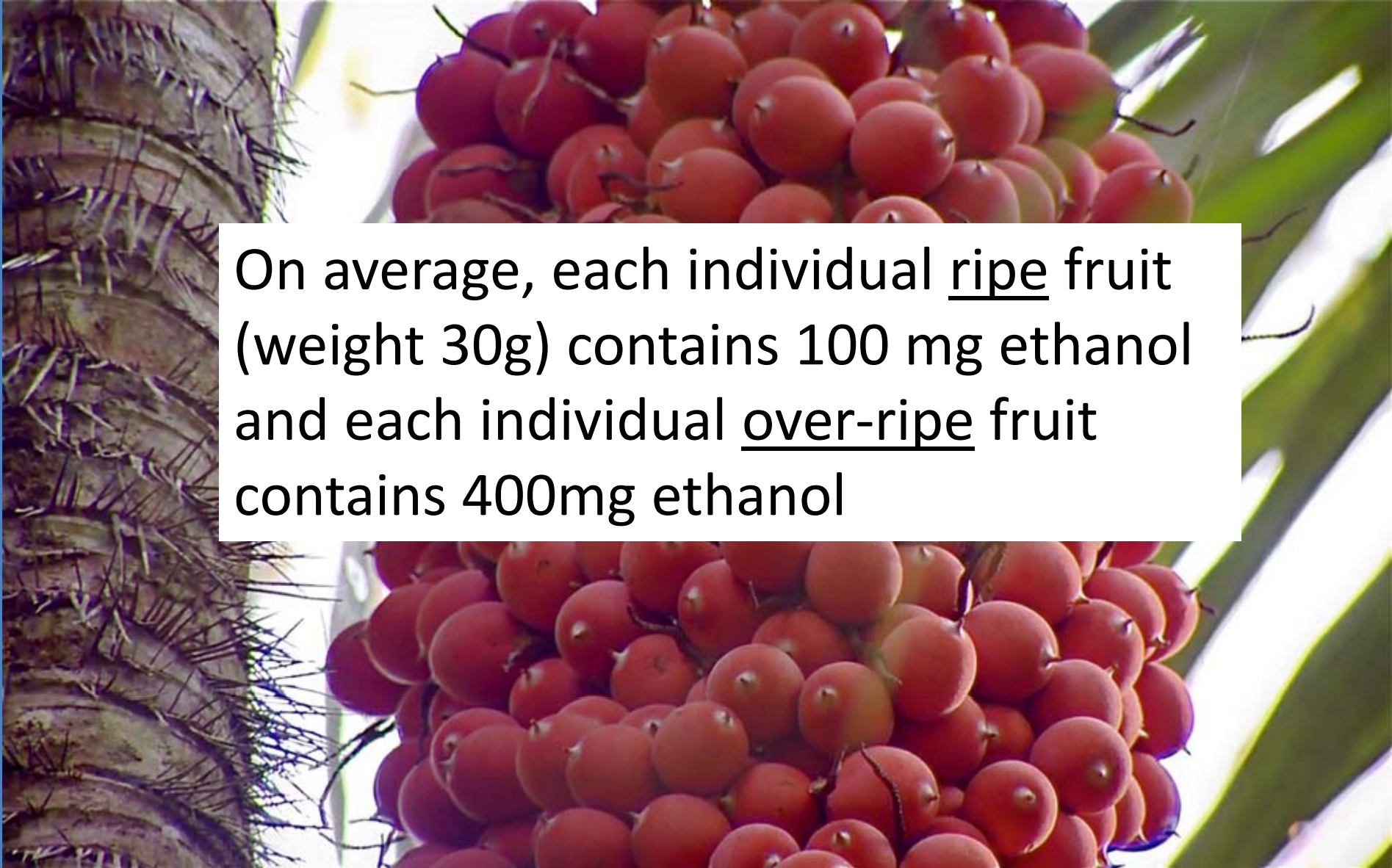






Impact of albendazole on cotinine concentration by baseline worm burden in Congo basin male hunter gatherers





On average, each individual ripe fruit (weight 30g) contains 100 mg ethanol and each individual over-ripe fruit contains 400mg ethanol

- The presence of ethanol within ripe fruit suggests low-level but chronic dietary exposure for all fruit-eating animals.
- Volatilized alcohols from fruit could potentially serve in olfactory localization of nutritional resources

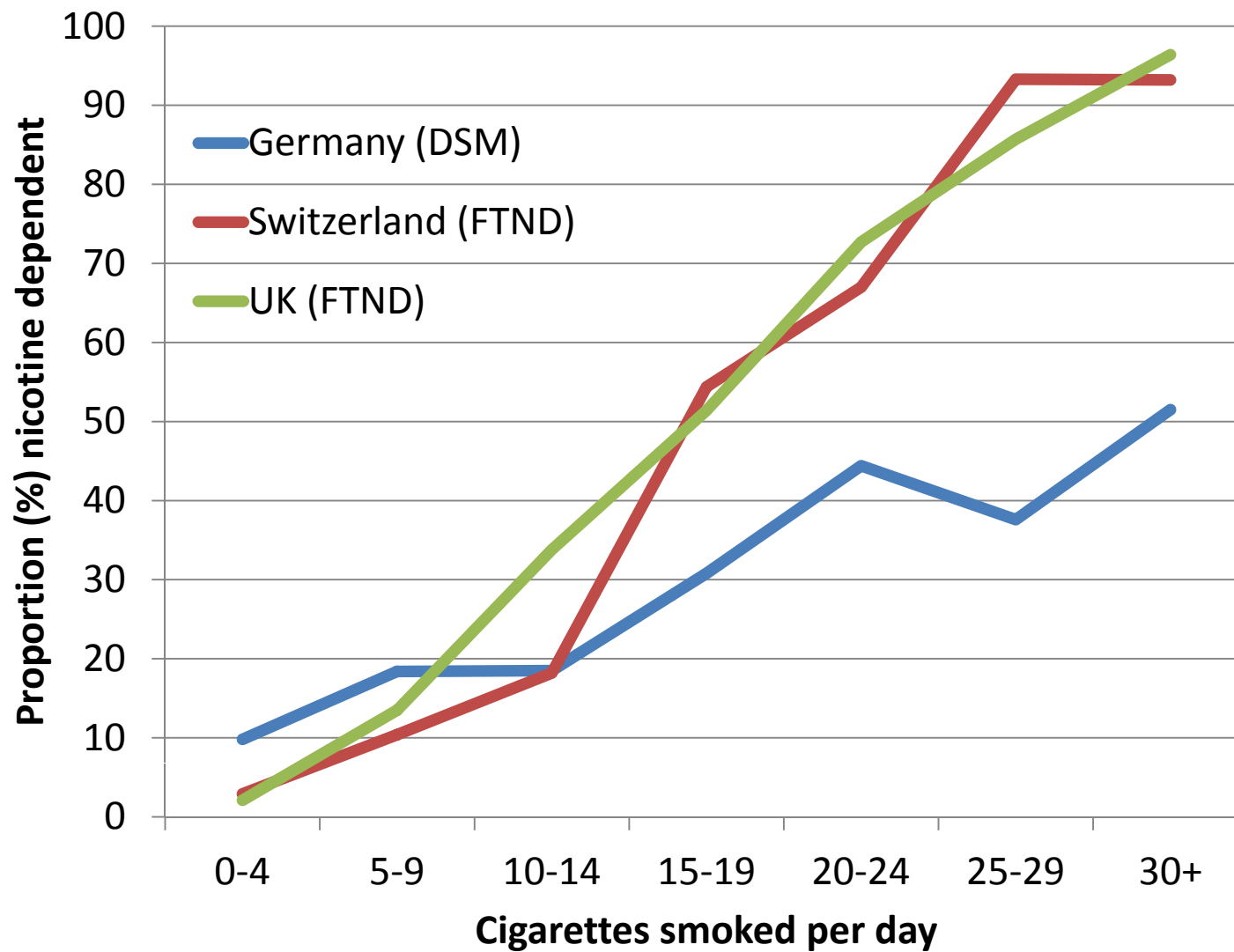
- Primate ancestors living 16-21 million years ago could not effectively metabolize consumed ethanol.
- However, by 6-12 million years ago, human's last common ancestor with gorillas and chimpanzees had evolved a digestion fully capable of metabolizing consumed ethanol, at levels found in fermenting fruits.

Thus, human evolution would suggest that we are

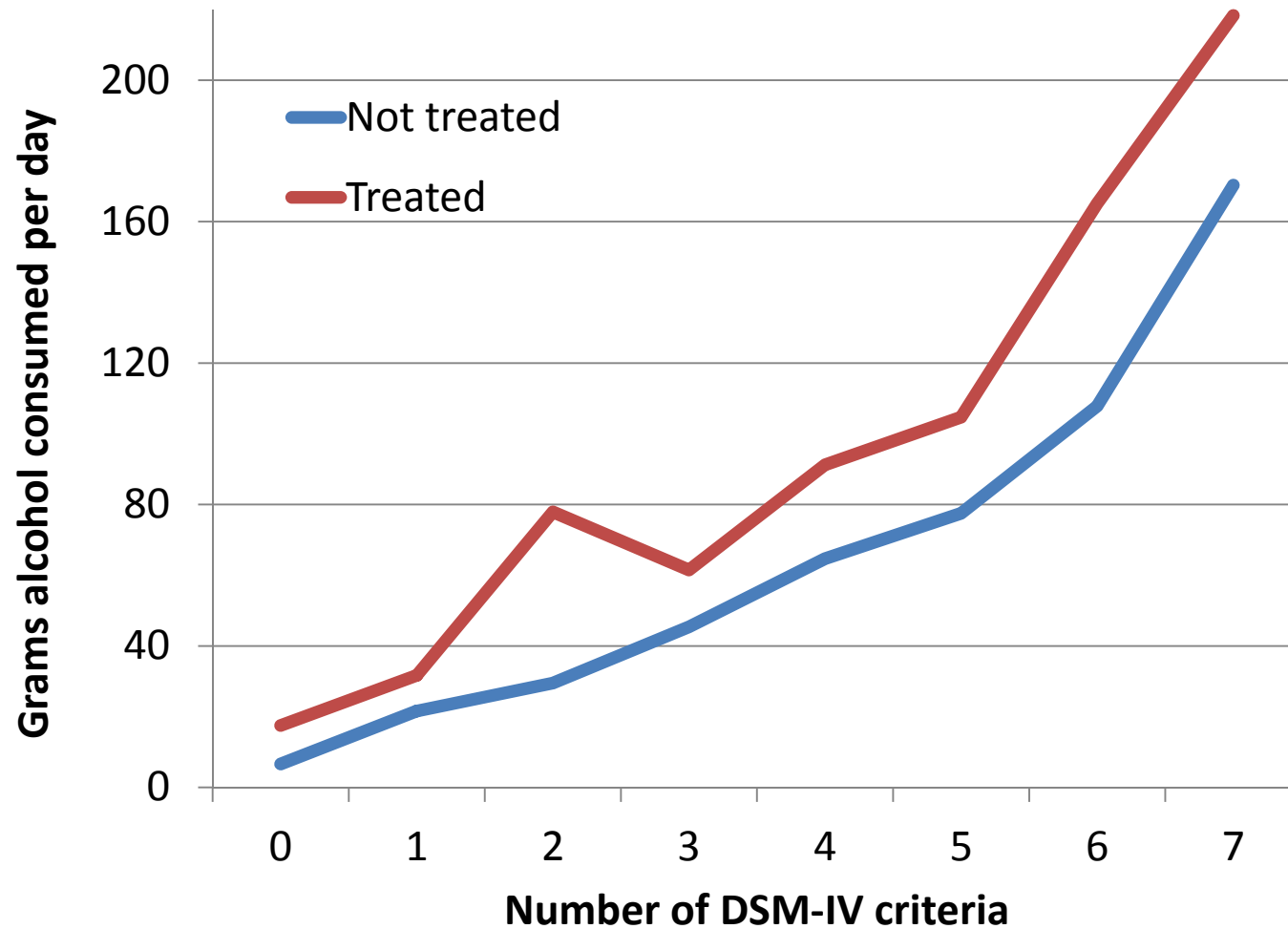
“active and functional”

in relation to the drugs that we take,
including alcohol and nicotine

“Active and Functional” speak to **potency**, **quantity** and **availability** (economic and physical) as being primary drivers of drug use and related harm.

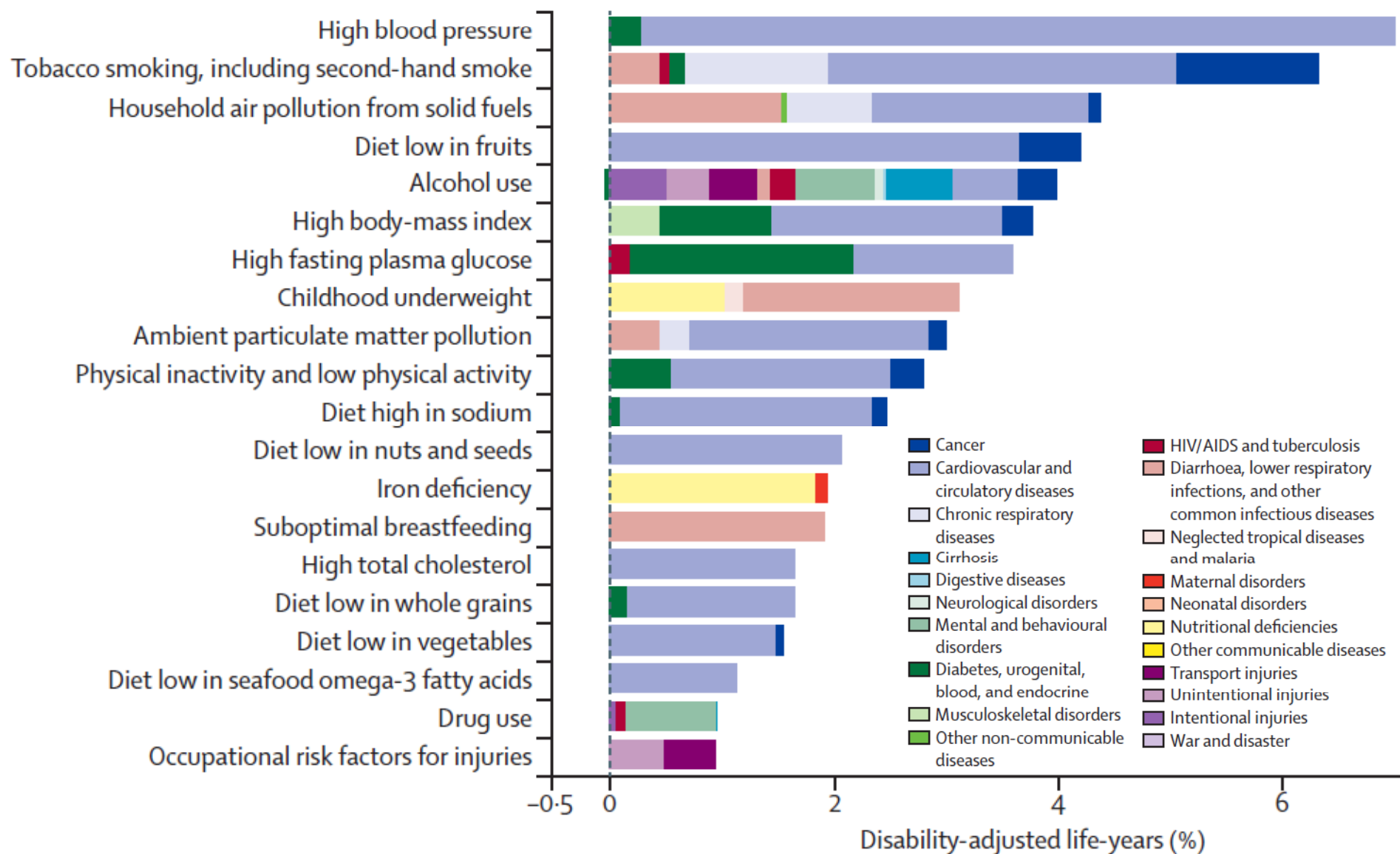


Proportion (%) nicotine dependent persons by number of cigarettes smoked per day

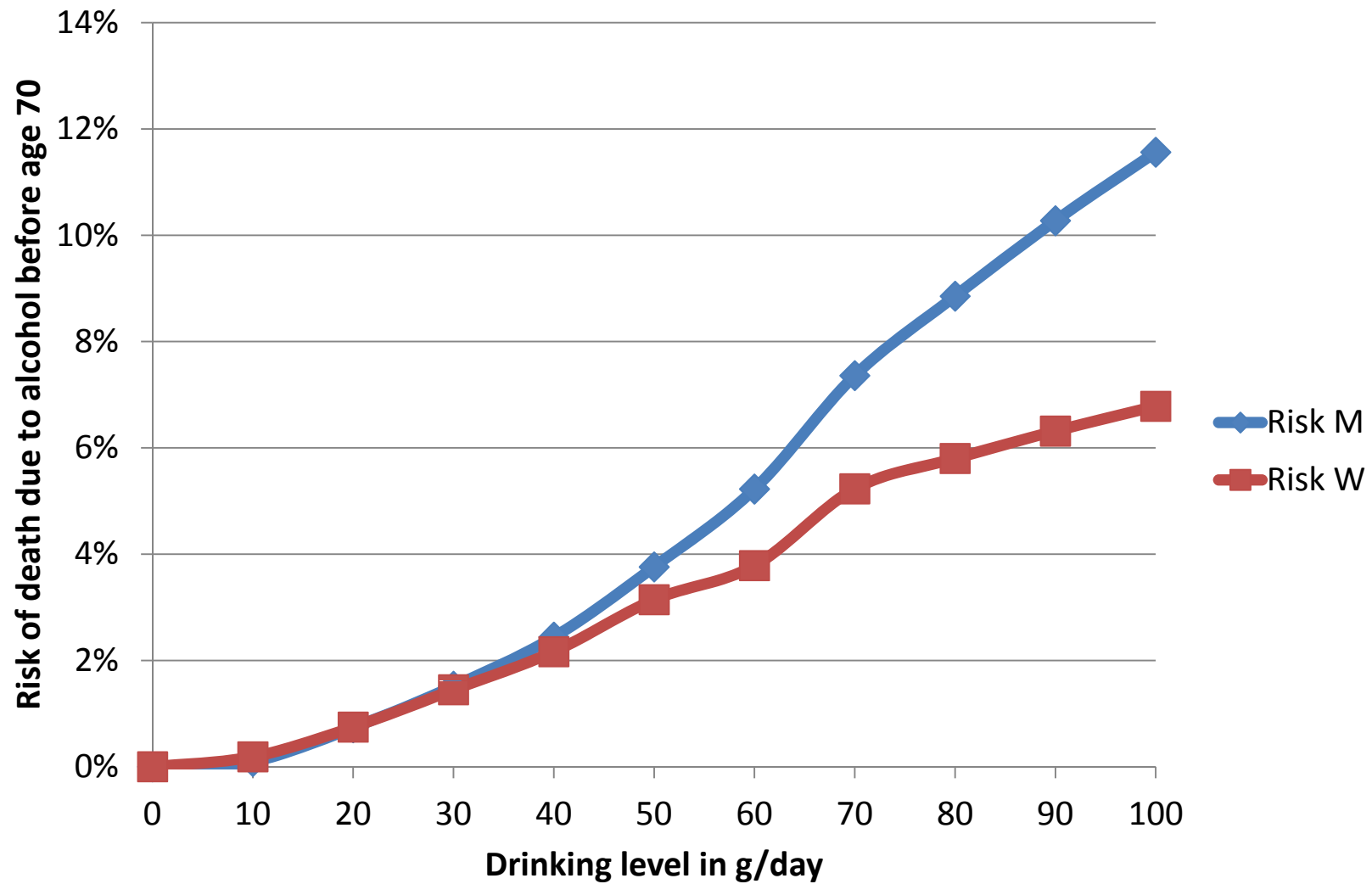


Number of DSM-IV criteria for alcohol dependence by grams alcohol per day (NESARC data)

Risk factors for disability adjusted life years, world, 2010



Source: Lim et al 2012

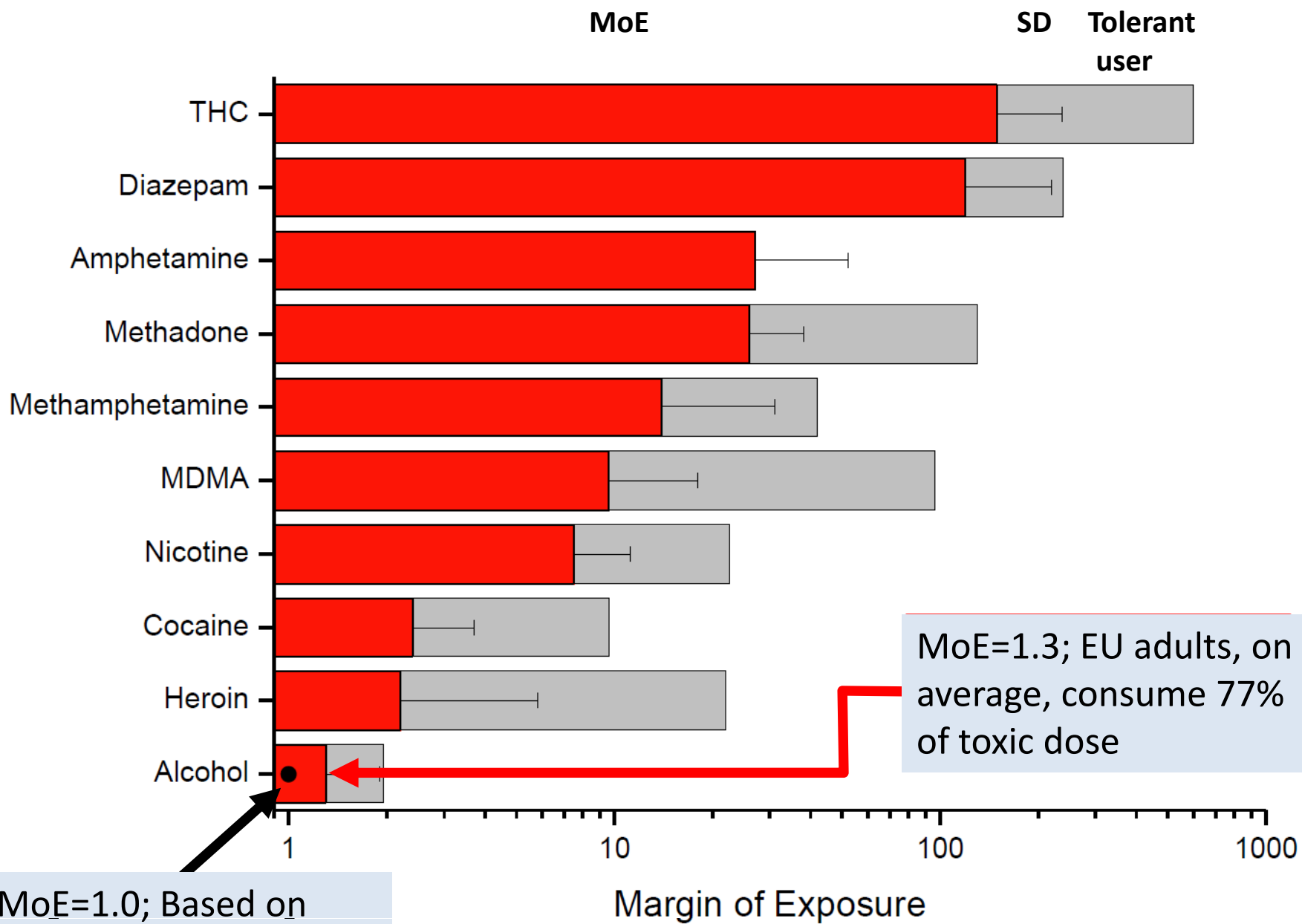


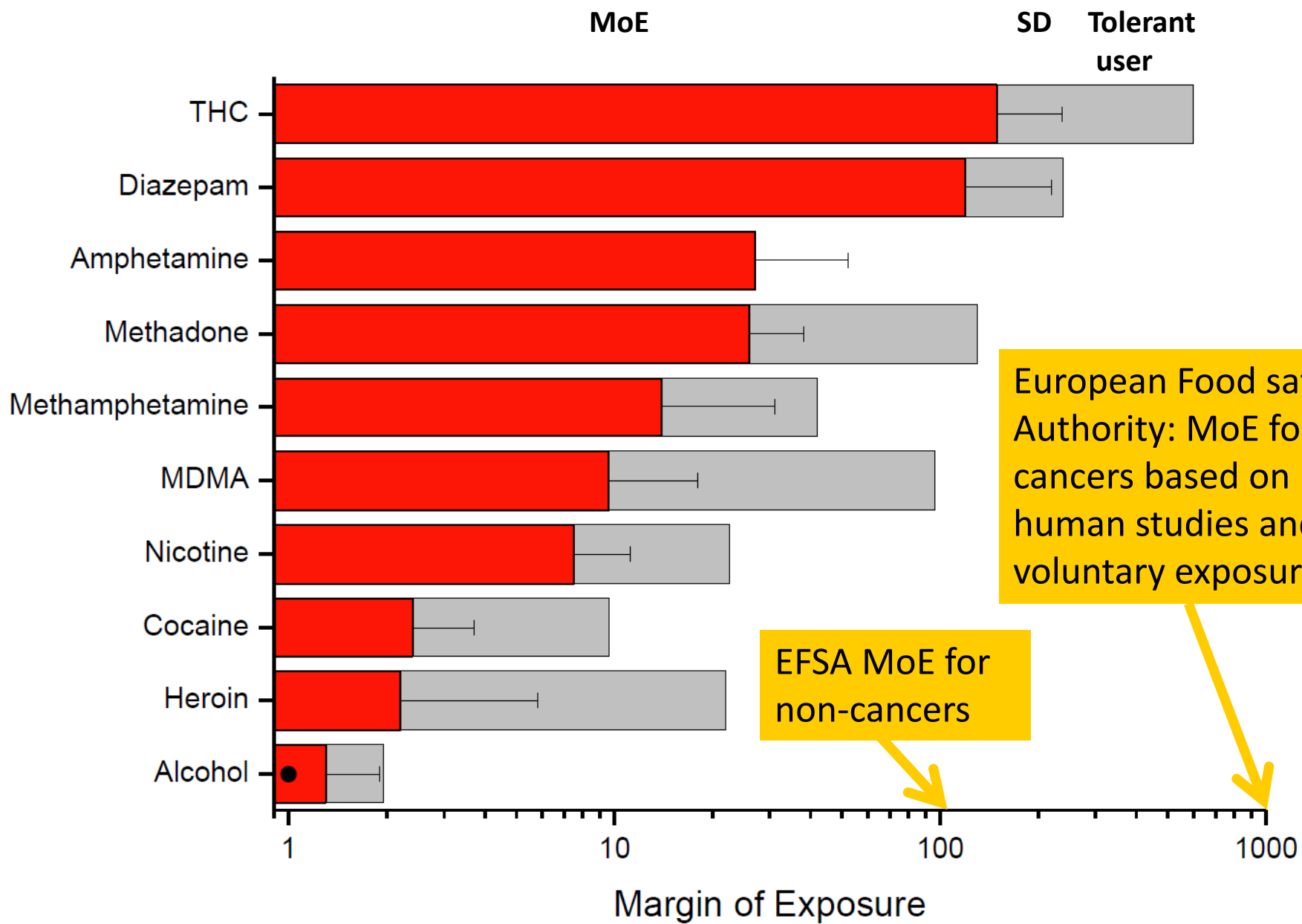
Risk of dying prematurely (up to age 70) due to alcohol consumption in European Union

Margin of Exposure analysis compares the ratio of a toxic dose with the dose consumed. The toxic dose can be defined as the dose in animals that increases death rates by 10%.

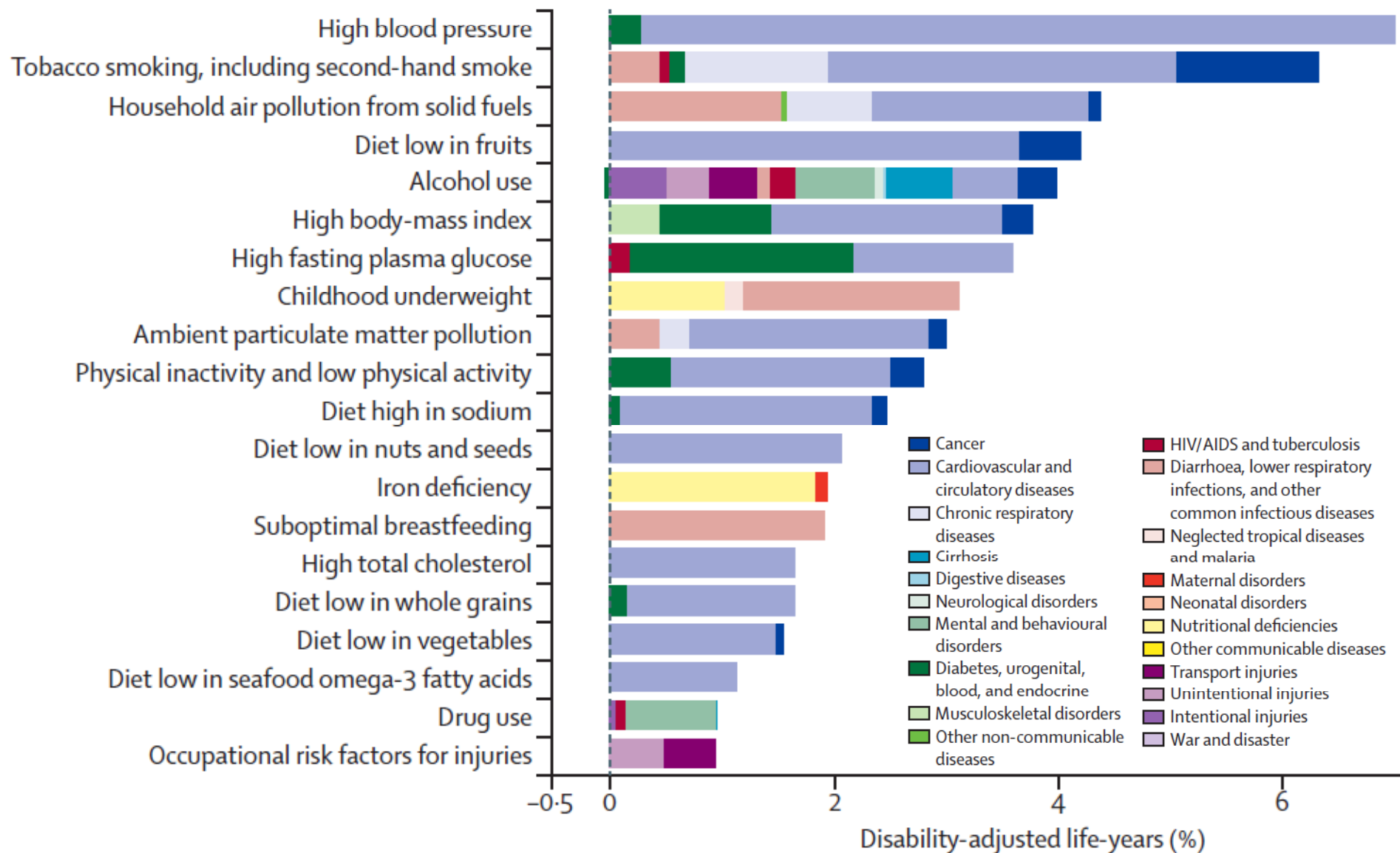
MoE=1: consuming toxic dose

MoE=100: consuming 1/100th toxic dose



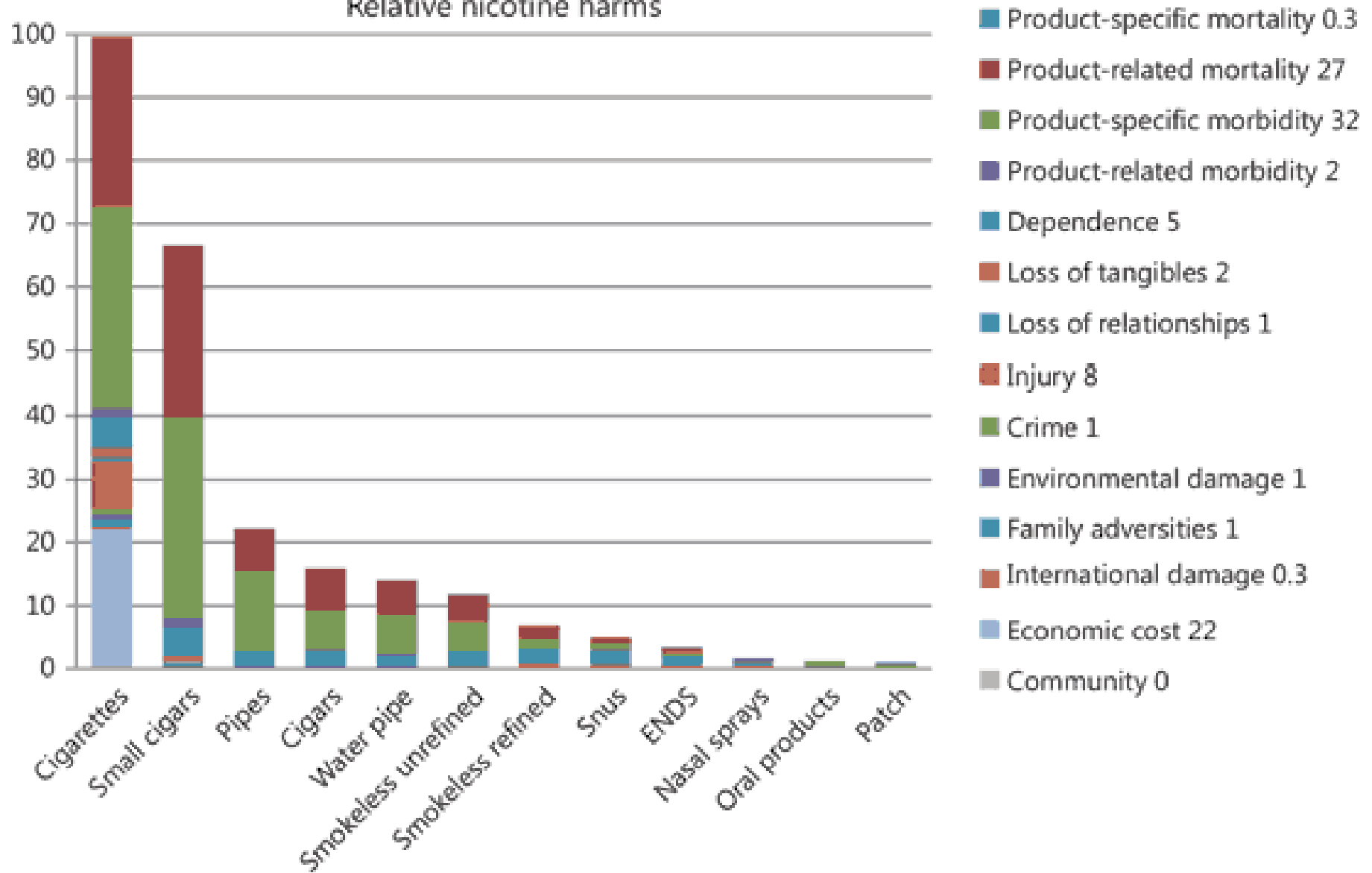


Risk factors for disability adjusted life years, world, 2010

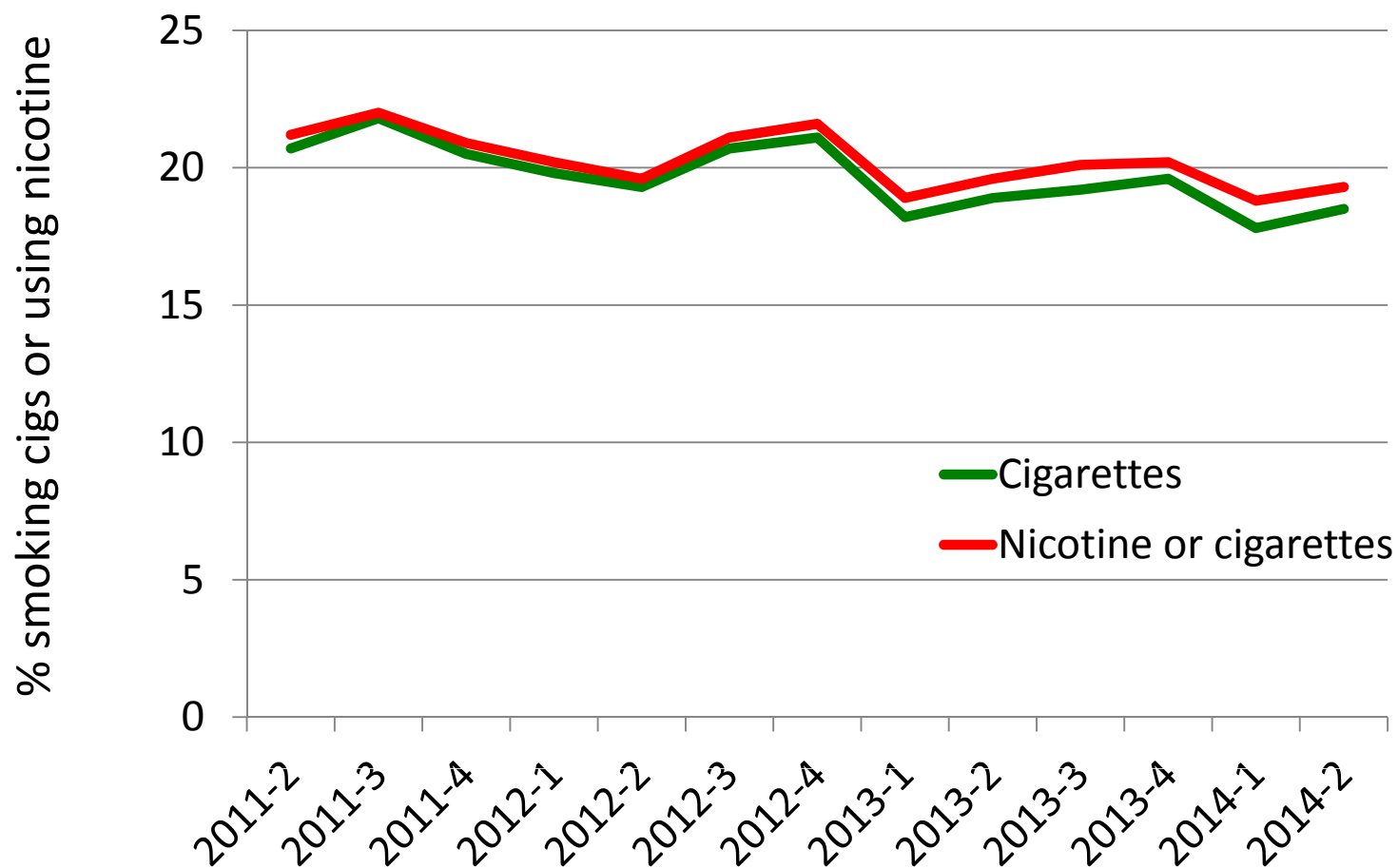


Source: Lim et al 2012

Relative nicotine harms



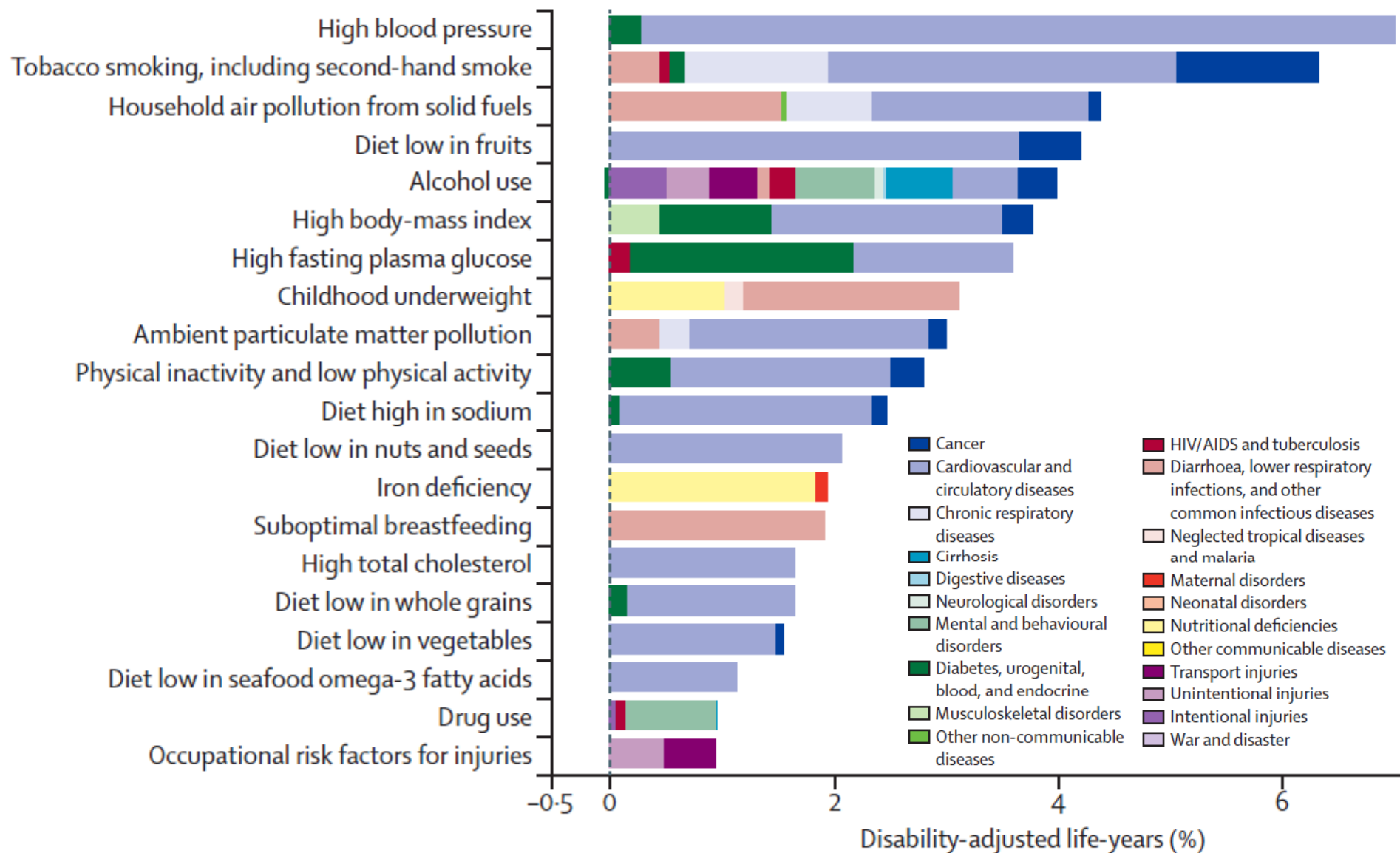
Prevalence of nicotine/cigarette use in UK





“For every million smokers who switched to an e-cigarette we could expect a reduction of more than 6000 premature deaths in the UK each year”

Risk factors for disability adjusted life years, world, 2010



Source: Lim et al 2012

SALT



Recommended salt daily intake

Sodium intake RANGES from:

1500 mg sodium day (IOM)

2000 mg sodium day (WHO)

2300 mg sodium day (USA Government)

Salt intake:

2000 mg sodium = 5 gr salt or 1 teaspoon

2 Teaspoons = 1 Tablespoon



*1 Teaspoon of salt = 2400 mg/sodium
2400 mg = maximum limit*

Any one of these reach your daily limit



Arby's Mozzarella Sticks:
3 sticks=1200mg sodium



Soy Sauce:
1 1/3 tbs=1200mg sodium



Chipotle Carnitas Burrito:
2/5 burrito=1200mg sodium



McDonald's Cheeseburger:
1 3/5 burger=1200mg sodium



Ramen Noodles:
3/4 package=1200mg sodium



Chicken Breast:
3 pieces=1200mg sodium



Cottage Cheese:
1 cup=1200mg sodium



Cereal:
5 1/5 cups=1200mg sodium



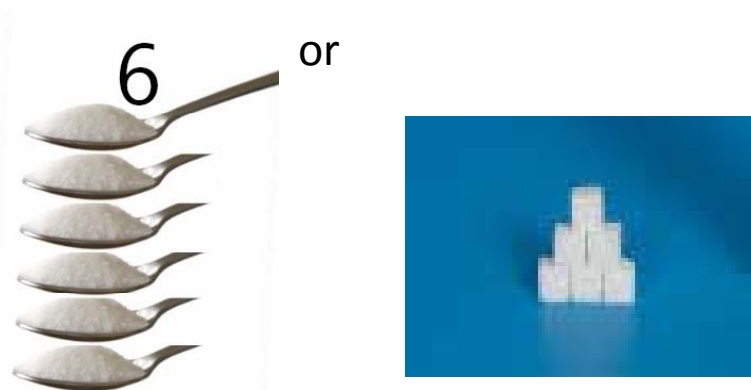
Ketchup:
7 4/5 tbs =1200mg sodium

SUGAR



Recommended sugar daily intake: many disagreements

- At least 10% of daily calorie intake = 50 gr of sugar a day (for adult of normal weight)
- Better if 5% of daily calorie intake = 25 gr sugar a day (for adult of normal weight)



Upper limit:
= 12 sugar cubes
= 12 teaspoons

IDEAL RECOMMENDED limit:
= 6 sugar cubes
= 6 teaspoons sugar

Most sugary drinks exceed daily recommendation

We gathered a few popular drinks from our canteen's refrigerator to check how much sugar each one contains. The results were surprising. Even 'healthier' drinks, such as flavoured mineral water and drinking yogurt, contain a large amount of sugar

GRAMS

50

45

40

35

30

25

20

15

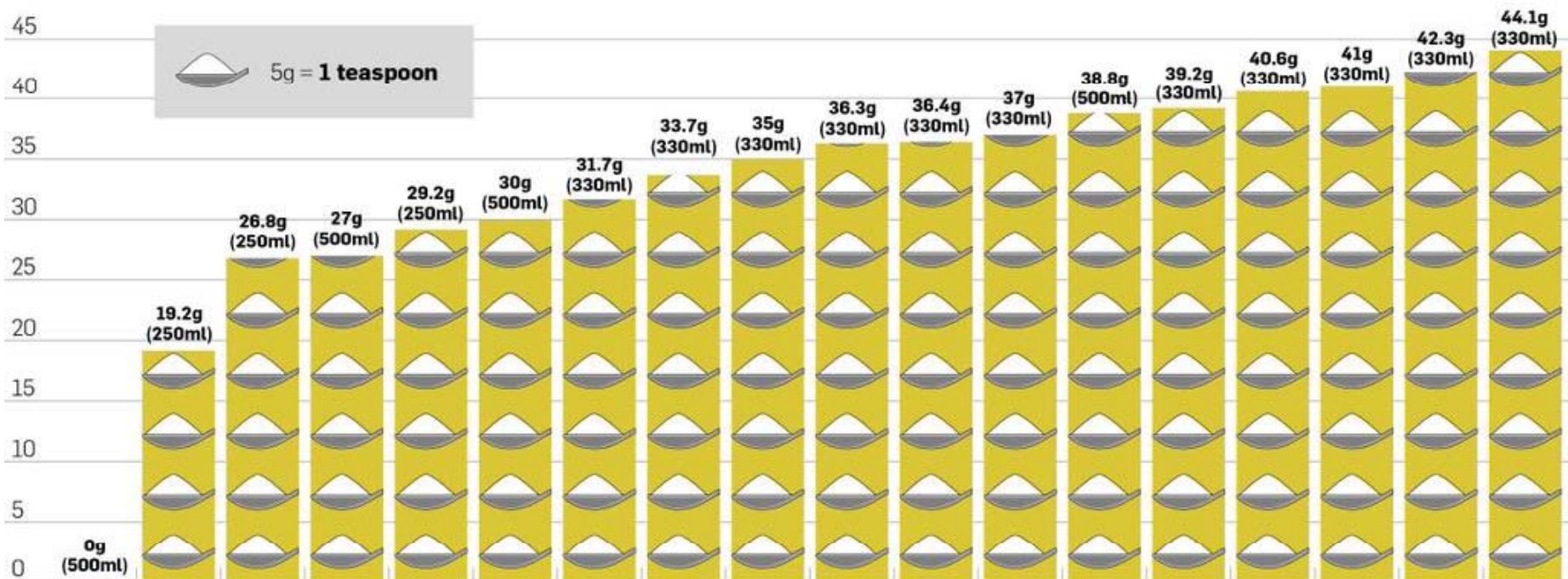
10

5

0



5g = 1 teaspoon



Valpré mineral water



Fuze Tea (lemon flavour)



Yogi-Sip (apricot flavour)



Glaceau Vitamin water (dragonfruit)



Play energy drink



Bonaqua flavoured water (litchi)



Appletiser



Sprite



Coca-Cola



Sparletta Sparberry



Sparletta Creme Soda



Sparletta Iron Brew



Powerade (Island Burst flavour)



Lemon Twist



Fanta Pineapple



Fanta Orange



Schweppes Dry Lemon



Fanta Grape

Other comparisons to the 6 cubes daily recommendation



Fruit and Vegetables:

5 a day

What is 5 a day?



Tomatoes

1 medium tomato



Oranges

1 orange



Bananas

1 medium banana



Strawberries

7 strawberries



Asparagus

5 spears



Avocado

Half an avocado



Peppers

Half a pepper



Kiwis

2 Kiwis



POTATOES

Though a vegetable and rich



SWEETCORN

Three heaped tbsp of kernels or 1 cob.



PEAS

Three heaped tablespoons. Frozen



ONION

One medium (or half a large) onion. It contains



LETTUCE

A cereal bowlful. Iceberg is least



CABBAGE

Four heaped (cooked) tablespoons. It



PEPPERS

Half a pepper. Green is lowest in calories (and



SPINACH

A bowl of fresh, or four discs of frozen. Forms



PARSNIP

One large parsnip. The vitamin C in them



KIDNEY BEANS

Three heaped tablespoons. No



OLIVES

Thirty olives. Although



LEEKS

One leek (white



CAULIFLOWER

Quarter of a cauliflower.



WATERCRESS

One x 75g pack.



GREEN BEANS

Four tablespoons.
Frozen beans (27p per



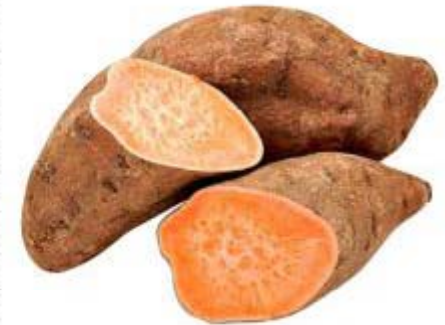
TOMATO

One medium or seven
cherry. Fresh tomatoes



ASPARAGUS

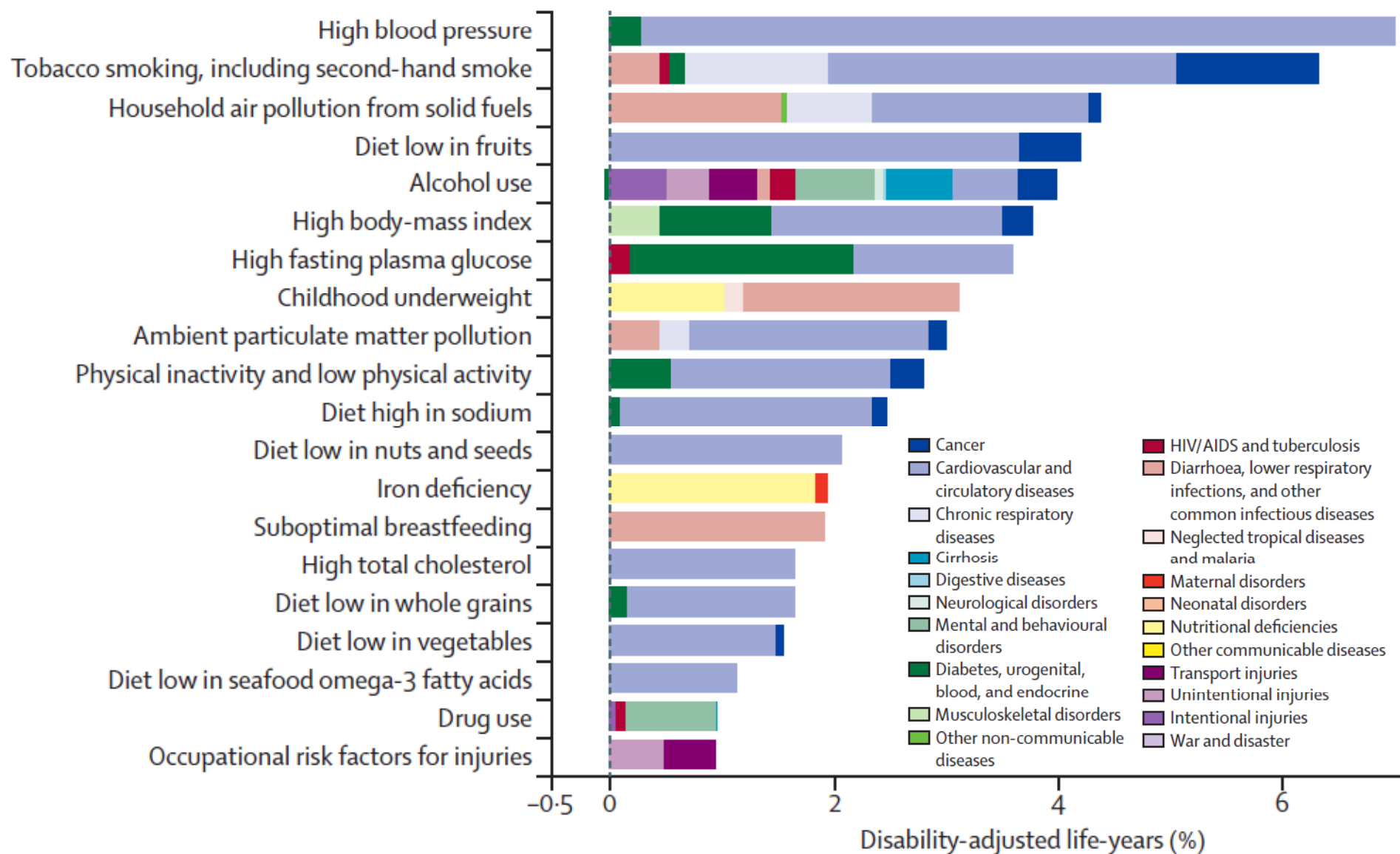
Seven spears. A very
good source of



SWEET POTATO

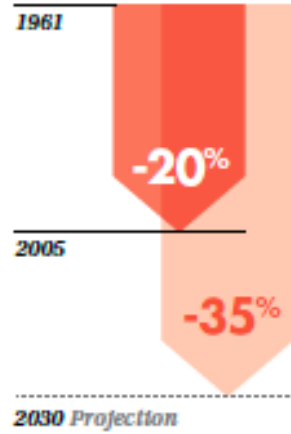
One large potato.
Rich in antioxidants, so

Risk factors for disability adjusted life years, world, 2010

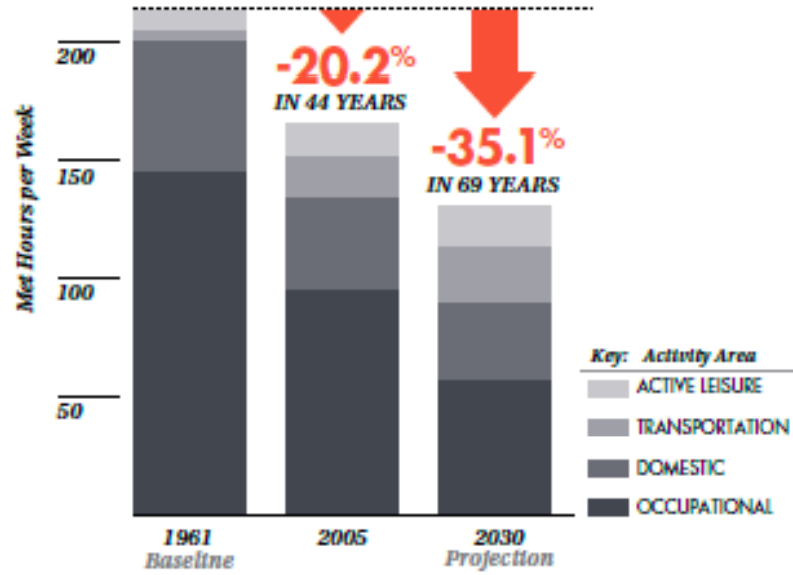


Source: Lim et al 2012

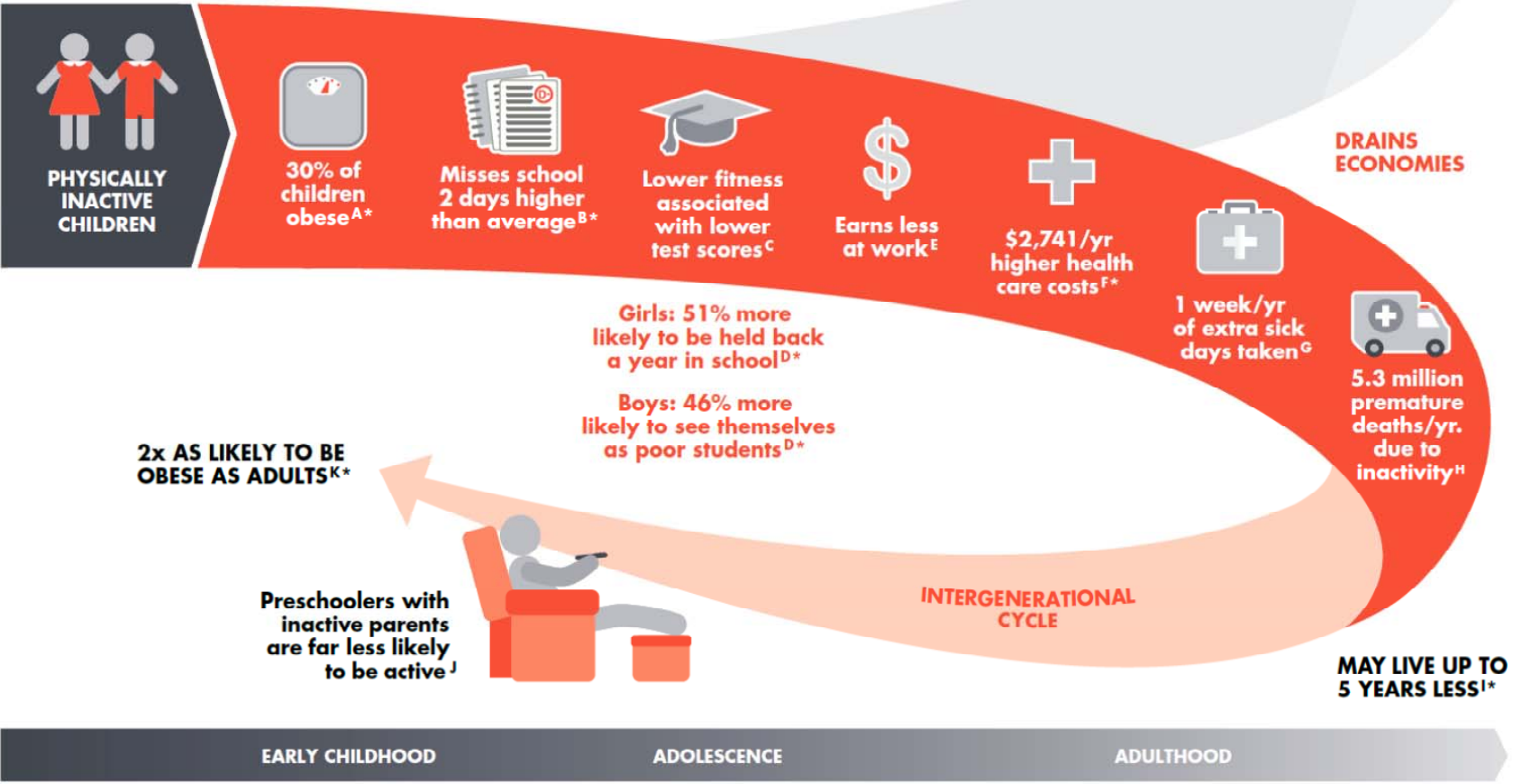
UK



**Total Decline
In Physical Activity**



**Decline in Physical Activity
by Activity Area**



INTELLECTUAL CAPITAL

IMPROVEMENTS IN:

- Educational attainment
- School engagement
- Processing speed
- Executive function/Inhibition/Mental flexibility
- Memory
- Academic performance
- Brain structure and function
- Concentration/Attention/Impulse control
- Learning
- ADHD management
- Age-related cognitive decline management

FINANCIAL CAPITAL

IMPROVEMENTS IN:

- Income
- Job success
- Productivity/Job performance
- Morale/Commitment/Turnover

REDUCTION IN:

- Health care costs
- Absenteeism
- Presenteeism

PHYSICAL CAPITAL

IMPROVEMENTS IN:

- General motor skills
- Functional fitness/Physical appearance
- Cardio respiratory fitness
- Muscular strength
- Adiposity/Body composition
- Lipid profile
- Bone health/Osteoporosis
- Joint health
- Maternal & infant health
- Rehabilitation & recovery
- Immune system function
- Sleep patterns
- Nutrition/Diet

PREVENTION/TREATMENT OF:

- Metabolic syndrome/Type 2 diabetes
 - Overall mortality
 - Cardiovascular disease
 - Coronary heart disease
 - Hypertension
 - Stroke
 - Colon & breast cancer
 - Lung, endometrial, ovarian cancers
 - Back pain
- REDUCTION OF:**
- Falls
 - Smoking
 - Teen pregnancy
 - Risky sex
 - Drug use
 - Addiction
 - Suicide



SOCIAL CAPITAL

IMPROVEMENTS IN:

- Social norms
- Social network/Positive relationships
- Social status/Social commitment
- Social inclusion & acceptance
- Trust/Teamwork/Collaboration
- Civic participation
- Gender equality
- Equity for persons with disabilities
- Crime, juvenile delinquency & gang participation reduction
- Community cohesion
- Peace/Understanding/Recovery
- Bridging differences (socio economic status, racial, ethnic, disability, religious, sexual)
- Safety & support

INDIVIDUAL CAPITAL

IMPROVEMENTS IN:

- Activity knowledge and skills
- Social skills/Life skills/Non-cognitive skills
- Sportsmanship
- Time management
- Goal setting
- Initiative/Leadership
- Honesty/Integrity/Respect/Responsibility
- Enthusiasm/Intrinsic motivation
- Commitment/Self discipline/Self control/Persistence
- Assertiveness & courage

EMOTIONAL CAPITAL

IMPROVEMENTS IN:

- Fun, enjoyment, satisfaction
- Feeling good
- Self esteem
- Self efficacy
- Body image
- Intrinsic motivation for physical activity
- Mood

PREVENTION/TREATMENT OF:

- Stress
- Depression
- Anxiety

Nike, Inc. initiated a multidisciplinary input and validation process with a pool of experts to develop this model, which is informed by more than 500 pieces of published research. The scholarly foundation for this work is further elucidated in Bailey, R., Hillman, C., Arent, S. & Peitpas, A. (2013). "Physical Activity: An Underestimated Investment in Human Capital?" *Journal of Physical Activity and Health*, 10, 289-308.

Guidelines for adults aged 19-64

To stay healthy, adults aged 19-64 should try to be active daily and should do:

- At least 150 minutes (2 hours and 30 minutes) of moderate-intensity aerobic activity such as cycling or fast walking every week, **and**
- muscle-strengthening activities on 2 or more days a week that work all major muscle groups (legs, hips, back, abdomen, chest, shoulders and arms).

4/20/2015

Physical activity guidelines for adults - Live Well - NHS Choices

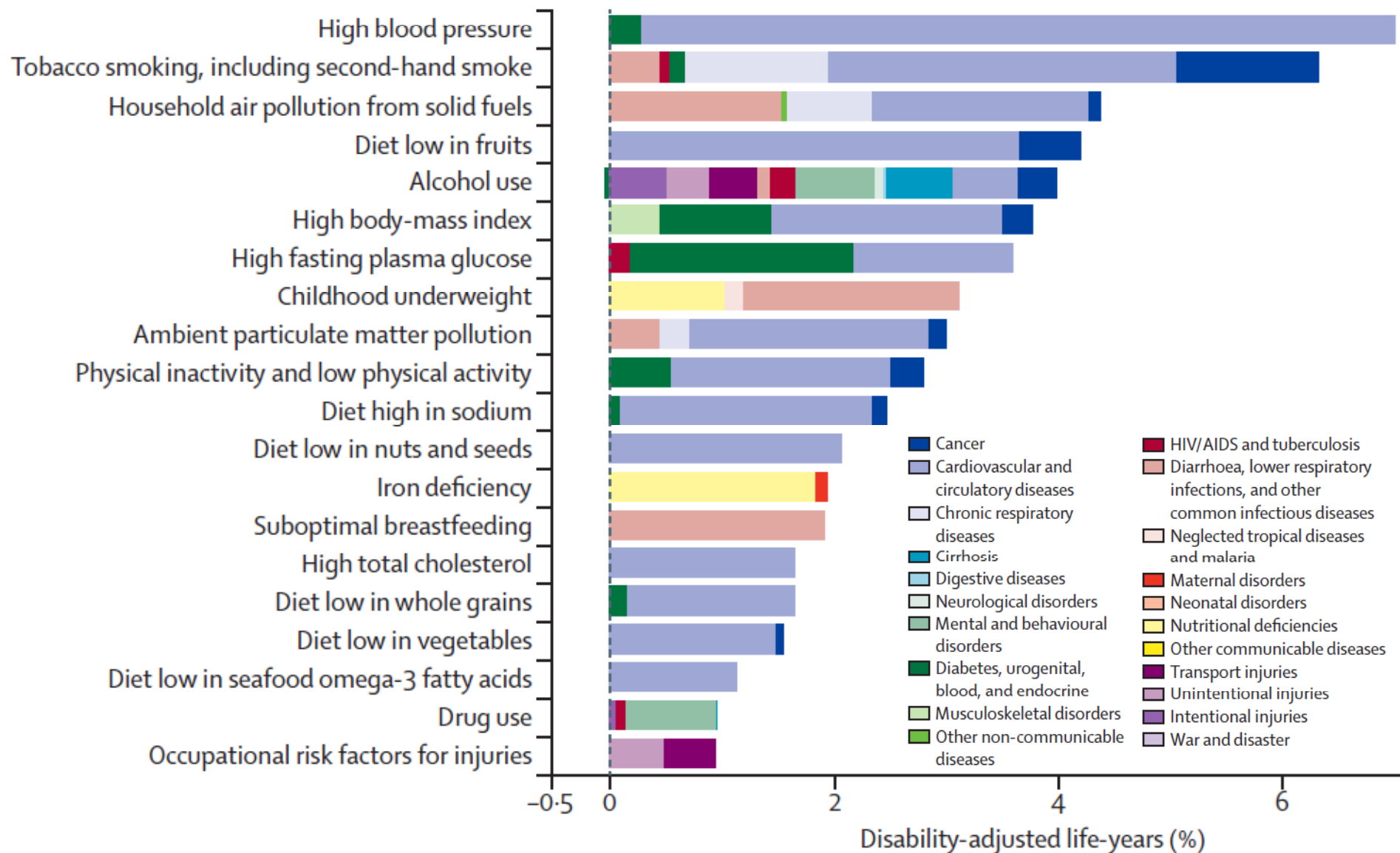


- 75 minutes (1 hour and 15 minutes) of vigorous-intensity aerobic activity such as running or a game of singles tennis every week, **and**
- muscle-strengthening activities on 2 or more days a week that work all major muscle groups (legs, hips, back, abdomen, chest, shoulders and arms).

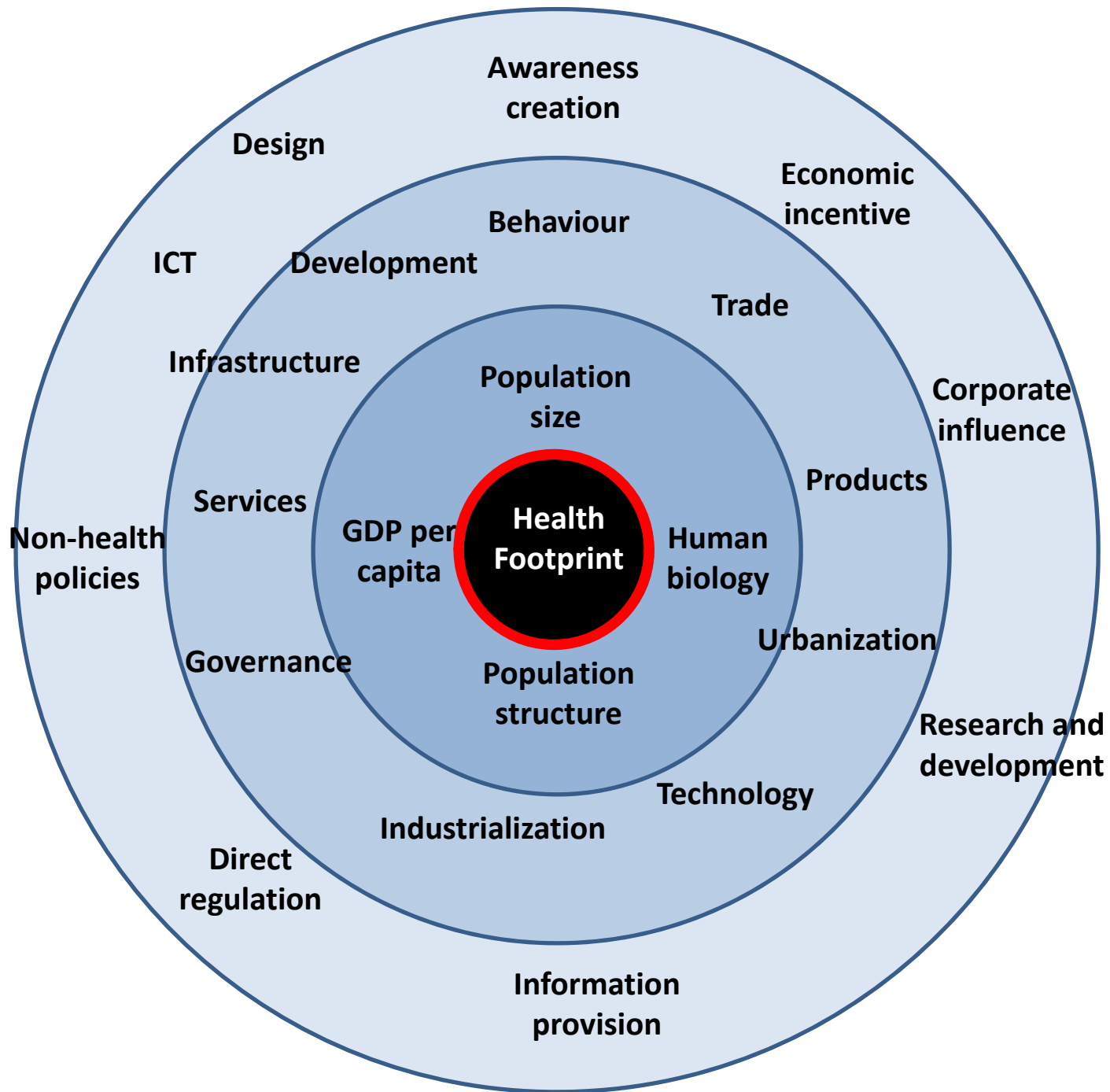


- An equivalent mix of moderate- and vigorous-intensity aerobic activity every week (for example 2 30-minute runs plus 30 minutes of fast walking), **and**
- muscle-strengthening activities on 2 or more days a week that work all major muscle groups (legs, hips, back, abdomen, chest, shoulders and arms).

Risk factors for disability adjusted life years, world, 2010



Source: Lim et al 2012



Thank you for your attention

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