

The Women's Lifestyle Medicine Clinic in Secondary Care “ Future proofing women's health and reducing impact on the NHS”

Introduction:

- Lifestyle medicine (LM) focuses on treating the cause of disease with evidence based medicine. LM centres on the “five pillars” of health; nutrition, exercise, sleep, stress management and risky substances/ smoking cessation.
- The 10 leading causes of death are significantly lifestyle related. In women's health we see a large proportion of cardio metabolic disease presenting with gynaecological morbidity. These include, polycystic ovarian syndrome (PCOS), subfertility, gestational diabetes, endometrial cancers among others. In obstetrics and gynaecology we are able to capture this large cohort of women where LM can impact their future health risk profiles, reduce obstetric risks and improve wellbeing, often avoiding the need for pharmaceuticals¹.
- Epigenetics are important for generations to come and it is our responsibility to educate our women on how their choices today could affect up to 3 generations in future². Incidences of gestational diabetes, rates of subfertility and PCOS have increased over the last decade. This is thought to be attributable to lifestyle factors mainly sedentary lifestyle, processed foods and increased amounts of stress. Early intervention aims to reduce current and future risks.
- The Pandemic has seen a steep rise in GOPD waiting times unless suspected cancer or urgent. Covid has in turn resulted in an increase in weight gain increasing further morbidity from women's wellness issues, women less likely to fit criteria for subfertility referral, increased risk of anovulation and GDM in future pregnancies to mention a few.

Method:

- Plans for a fully virtual telemedicine Women's Lifestyle Clinic was proposed and agreed by managers in healthcare. We liaised with graphics team in order to brand the new clinic and make information attractive and engaging for our patients. Telemedicine clinics would reduce the need for travel, reduce footfall to hospitals, improve accessibility for women who could not drive and avoid the need for additional clinic space and teams, reducing cost markedly. Fully integrative virtual platform: women can access lifestyle prescriptions to include nutritional information packages, exercise advice, appointment schedule 24 hours a day from their smart phones.
- Criteria for WLM clinic:
 - “BMI >30 with diagnosis of PCOS, subfertility, endometriosis, menorrhagia, dysmenorrhoea, GDM previously, T2DM wishing to conceive and motivated to effect lifestyle changes”
- Clinic Journey Timeline:
 1. Medical symptoms questionnaire sent via virtual platform to be completed prior to receiving an appointment: questionnaire will measure PROMS, PREMS in order to evaluate the clinic in future as well as provide patient information to aid with streamlining the consultation.
 2. 2.Telemedicine 40 minute appointment given: bespoke lifestyle prescription sent to patient on virtual platform <24hrs. Inclusive of nutrition, specific exercise, information e leaflets to educate re lifestyle, including stress management and recipes.
 3. 2 week f up with our specialist nurse to ensure engagement and address any concerns 15 minutes.
 4. 4th week follow up with LM Consultant via telemedicine platform 20 minutes ; strategies for ongoing success with MSQ for PREMS and PROMS data.

Conclusion:

Healthcare is changing. There is more morbidity, less funding and more chronic disease. Telemedicine lifestyle clinics allow us to deliver a mode of healthcare looking to the future wellbeing of patients to ease impact on our overwhelmed NHS services.

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