

# Group medical visits and lifestyle modification

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**G**roup visits are a fairly new approach to medical treatment. Most frequently, group visits have been used to treat a specific, chronic condition such as non-insulin-dependent diabetes. At the Sastun Center of Integrative Health Care in Mission, Kansas, we created a group medical visit program for all disease states requiring lifestyle modification.

**Methods.** Our group met monthly for 75 minutes. The first half of the meeting consisted of activities typical of a traditional medical visit. When patients arrived, a nurse measured vital signs and weight, including a body mass index, fat mass, and so forth. The group met around a table. After collecting signed confidentiality agreements from each patient, the physician went around the table and spent time with each patient discussing current medical problems. Unlike a typical office visit, in the group format all members listen and discuss each patient's situation.

The second half was spent discussing a new topic. A guest speaker or another practitioner at the Sastun Center usually conducted this part of the session. Examples of discussion topics were movement for people with arthritis, yoga stretches and breathing, nutrition with a dietician, a special "dysglycemic" diet, handling holiday stress, and stress-related eating. All patients attending had 1 or more of these health problems: obesity, hypertension, type 2 diabetes, or hyperlipidemia.

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**Results.** Five patients attended at least 4 sessions in 6 months. Other patients attended but not consistently. All members of the study and control groups were female, though this was not intentional. A majority of patients at the Sastun Center are female, so this was not surprising. The average age was 60 years (range, 52–66) for the active group and 50 years (range, 45–60) for the control group.

Overall, participants in the group medical visits exhibited greater improvements in weight loss and in cholesterol, triglyceride, and LDL-C reductions when compared with a control group of other patients from the Sastun Center with similar demographics. The active group had an average weight loss of 10.6 pounds (4.2%) compared with 1.8 pounds (0.9%) for the control group. The total cholesterol for the active group decreased an average of 12.3 mg/dL (6%), while the control group had an average increase of 13 mg/dL (5.7%). Similarly, there was an average decrease in triglycerides of 20 mg/dL (11.2%) for the active group and an average increase of 40.8 mg/dL (27.8%) for the control group. The LDL levels for the active and control groups changed  $-4$  mg/dL ( $-4.1\%$ ) and  $+3.4$  mg/dL ( $-0.16\%$ ), respectively. The HDL levels overall did not change for the active or control groups.

**Conclusion.** Though our study used very small patient numbers, it appears the patients participating in the group medical visits had greater improvement compared with similar patients not participating in the group. Group medical visits may be a successful method for helping patients who need lifestyle modifications.