Background:

The Osher Center for Integrative Health at UVM has established a Planetary Health arm, to explore the deepening understanding of the myriad ways our health, healthcare system, and planet's health are intricately linked. We are aligning with the Planetary Health Alliance (PHA)'s emergent tools, which support integration of policies at institutional, state, and federal levels that promote human well-being and planetary health.

This panel of UVM Health Network experts will discuss:

- climate-related health needs
- how to talk about the climate with patients
- healthcare options that are better for the planet

Laura Mann Integrative Healthcare Lecture Series: Planetary Health Panel

- Christine Vatovec, PhD, Planetary Health Lead, Osher Center for Integrative Health
- Kim Dittus, MD, PhD, Director, Integrative Oncology Clinical Services, Associate Professor, Medicine-Hematology Oncology
- Megan Malgeri, MD, Assistant Professor, Family Medicine
- David A. Rand, DO, Assistant Professor, Internal Medicine
- Andrew Rosenfeld, MD, Associate Professor, Psychiatry and Pediatric

Image: Nature

Planetary Health and Healthcare: What are the connections?

- 1. Climate-related health needs in Vermont
- 2. What role does healthcare play in climate change?

Planetary Health and Healthcare: What are the connections?

1. Climate-related health needs in Vermont

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Climate change in Vermont is resulting in hotter summers, shorter winters, and more frequent storms.



Vermont's climate will continue to change.

Vermont will continue to get **warmer** and experience **more frequent heavy precipitation events**.

https://www.healthvermont.gov/environment/climate/climate-change

Climate Change & Health in Vermont



Climate change is increasing health risks in Vermont:

- Extreme heat
- Extreme weather
- Vector-borne diseases
- Air quality
- Foodborne and waterborne pathogens
- Cyanobacteria (blue-green algae)



Prepared for the 2017 Agency of Natural Resources White Paper Series on Climate Change



https://www.healthvermont.gov/sites/default/files/documents/pdf/ENV_CH_WhitePaper.pdf

Extreme heat in Vermont

- Temperatures at or above 87°F = Vermonters are 8 times more likely to visit the emergency room for a heat-related illness
- In Vermont, maximum temperatures reach 87°F:
 - Currently about six times per year
 - By 2100 between 20 and 34 times per year



https://www.healthvermont.gov/sites/default/files/documents/pdf/ENV_CH_WhitePaper.pdf

Extreme weather in Vermont

Precipitation events of three inches or more

- Currently less than once per decade
- By 2100 twice every three years
- Health-related impacts
 - o Injuries
 - Exposure to contaminated water and debris
 - o Exposure to mold



https://www.healthvermont.gov/sites/default/files/documents/pdf/ENV_CH_WhitePaper.pdf

Foodborne and waterborne pathogens in Vermont

- Warmer temperatures + more frequent rain events = Combined Sewer Overflows and agricultural run-off
- Contamination of:
 - \circ Drinking water
 - Recreational water
 - o Irrigation water (crop contamination)





Figure 7: Percent of samples with *E*. coli detected in drinking water or *E*. coli above 235cfu/100 ml in recreational water following precipitation. *Few samples were available for public drinking water and recreational water for precipitation over 1 inch. These samples were combined with those from the 0.5 - 1'' category.

Cyanobacteria in Vermont



 Warmer temperatures + more frequent rain events (agricultural run-off of nutrients) = more favorable conditions for cyanobacterial blooms

Vector-borne diseases in Vermont

- Warmer temperatures + shorter winter season = increased distribution and abundance of black-legged ticks
 - Lyme disease
 - Anaplasmosis
 - \circ Babesiosis
- Warmer and wetter conditions = more mosquitoes
 - o West Nile Virus
 - o Eastern Equine Encephalitis







Graph courtesy of Emily Pareles, Epidemiologist, Vermont Department of Health

Air quality in Vermont

- Wildfire smoke
 - o Air pollution and respiratory health
- Longer growing season + higher levels of carbon dioxide = increased plant growth and pollen
 - Allergies and respiratory health



Pollen Counts Rise with Increasing Carbon Dioxide



Figure 9: Pollen production in ragweed grown in chambers at carbon dioxide levels simulating past, current and projected atmospheric levels. (from Ziska and Caufield 2000, as cited in Luber et al. 2013).

Mental health impacts of climate change

- Stress
- Anxiety
- Depression
- Trauma and grief following flooding events



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Healthcare impacts planetary health

Climate change

- Global health care sector = 5% of global emissions
- U.S. health care sector = 8.5% of national emissions
 - 82% of emissions result from supply chains (e.g. medical supplies, pharmaceuticals, medical devices, food, etc.)

Pharmaceuticals

- Account for 10% of sector GHG emissions
- U.S. uses more than any other country, but we are not healthier



Source: <u>https://www.commonwealthfund.org/publications/explainer/2022/apr/how-us-health-care-system-contributes-climate-change</u>

There is a critical need to integrate evidence-based approaches into healthcare that improve planetary health outcomes.

- Keep people healthy to decrease healthcare utilization.
- Integrate evidence-based therapies that decrease hospitalization and reduce reliance on pharmaceuticals.



Integrative Health: health promotion

Lifestyle tools

- Nutrition
- Movement/physical activity
- Sleep
- Stress management
- Nature connection

Better planetary health outcomes through health promotion and disease prevention

- Lower rates of cardiovascular disease, cancer, obesity, diabetes (3:4:50 campaign)
- ✓ Co-benefits of plant-based diets, active transportation
- ✓ Decreased demand for health care services and pharmaceuticals

Integrative Health: supportive care for illness

Supportive care

- Lifestyle tools
- Mind-body therapies (e.g. yoga, meditation, nature therapy)
- Biochemical therapies (e.g. probiotics, functional foods)
- Biomechanical therapies (e.g. physical therapy, therapeutic massage)
- Bioenergetic therapies (e.g. acupuncture)

Better outcomes through supportive care

- ✓ Decreased demand for health care services and pharmaceuticals
- ✓ Decreased length-of-stay in health care facilities
 - Lower resource use (facilities, medical supplies)
 - Decreased waste generation and disposal

Panelists:

- 1. What climate-related health needs are you seeing?
- 2. What role do you see healthcare playing to improve outcomes for both patients and the planet?
- 3. How are you talking about climate change with patients?

- Andrew Rosenfeld, MD, Psychiatry and Pediatrics
- David A. Rand, DO, Internal Medicine
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Is this even my job?

- What is climate anxiety?
 - "Distress about climate change and its impacts on the landscape and human existence" (Lowe, 2023)
 - Shows up in the typical ways of anxiety: intrusive thoughts, physical stress, avoidance behaviors
- Be the change you wish to see in the world
 - 1. Awareness
 - 2. Empowerment
 - 3. Action



"If we would just slow down, happiness would catch up to us." Richard Carlson PhD (Don't Sweat the Small Stuff)

- Mindful prescribing & deprescribing
- Integrative approaches
- Climate Anxiety ROS
- Telehealth
- MyGreenDoctor.org

Wellness Area	Current Activity: what I'm doing	Priority for Change 1-10 (1=very low, 10 = very high)
Movement/Nature		
Parenting/Family Warmth		
Kindness/Gratitude		
Music/Arts/Dance		
Sleep		
Nutrition/Hydration		
Contemplative Practice		
Digital Health		
Mentorship/Community		
Reading/Learning		
Other		

Wellness Area	Current Activity: Effect Size	Reference
Movement/Nature	0.64	CAP & Mental Health, 2022
Parenting/Family Warmth		
Kindness/Gratitude	0.5	Reducing depression by self- compassion, pooled effect size (Egar 2022)
Music/Arts/Dance		
Sleep	Shorter sleep→2x risk <i>decreased</i> positive affect, 1.83x risk of anger, 1.62x depression	Gradisar 2022, <i>Nat Rev Psychology</i> Short 2020, "Relationship between sleep duration & mood"
Nutrition/Hydration	0.5	Br J Nutr 2016 (116:12)
Contemplative Practice	0.46 (adjunctive mindfulness + therapy), 0.76 (MBCT), 0.47 (vs active control)	Dunning 2019; J Child Psychol Psychiatry
Digital Health		
Psychotherapy	0.55 adolescents 0.35 pre-adolescents	2023 Cuijpers et al. J of Affective Disorders
Reading/Learning		
Antidepressant Med	0.12 overall 0.19 in studies with low placebo response	J Affect Disord. 2022 May 15;305:55-64.

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Audience Q & A:

- 1. What questions do you have for our panel?
- 2. What climate-related health needs are you seeing?
- 3. What role do you see healthcare playing to improve outcomes for both patients and the planet?
- 4. How are you talking about climate change with patients?





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Join us on the Osher Center Planetary Health working group!