

LIFESTYLE AS MEDICINE

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WELCOME | LIFESTYLE AS MEDICINE | HEALTH |
ENGLAND



2026

Radio or TV, newspaper or SM, there is so much talk about 'healthy lifestyle'.

- Greggs is changing menus- making them healthier- to maintain profits.
- M&S are watching closely for changes in eating trends- to maintain profits
- More demand for high protein, high fibre food by those on 'skinny jobs'
- UK government ban of Junk Food advertising before the 9pm watershed

You might be asking, 'What do I do now? The 'right' advice is out there for all to see. Is there still a role for a Lifestyle Medicine practitioner? '

Yes, yes, yes there is. None of us is going to be out of work just yet.

So Happy New Year. Let's be glad that the media is 'catching on'. Be glad that the Living Well Course messages are now across many media outlets (and are even becoming government policy). It's progress. One small step at a time.

A Tale of Two Plants

The 2 cyclamen plants in the photo were given to me, flowering beautifully, in late November.

One of them (on the left) lived with me in the kitchen- I sang to it, admired it, talked to it, watered it when it wilted- and now I will plant it in the garden to bloom next winter.

The cyclamen on the right sat in the lounge. On a little table, displaying its flowers. Sometimes (out of reach of grandkids) it went behind the tv. It was out of sight much of the time. We spend more time in the kitchen than the lounge. It wasn't talked to, or smiled at (or watered when it was thirsty)



Is this a picture of our role as Lifestyle Medicine practitioners?

For people, just as for plants, it's the personal touch that makes a difference. Noticing when someone is wilting and taking action.

And for ourselves- we need to seek out those who will care for us and support us.

26 Lifestyle Messages for Healthcare Workers – 2026

1. Lifestyle medicine is core medicine -for both ourselves and our patients

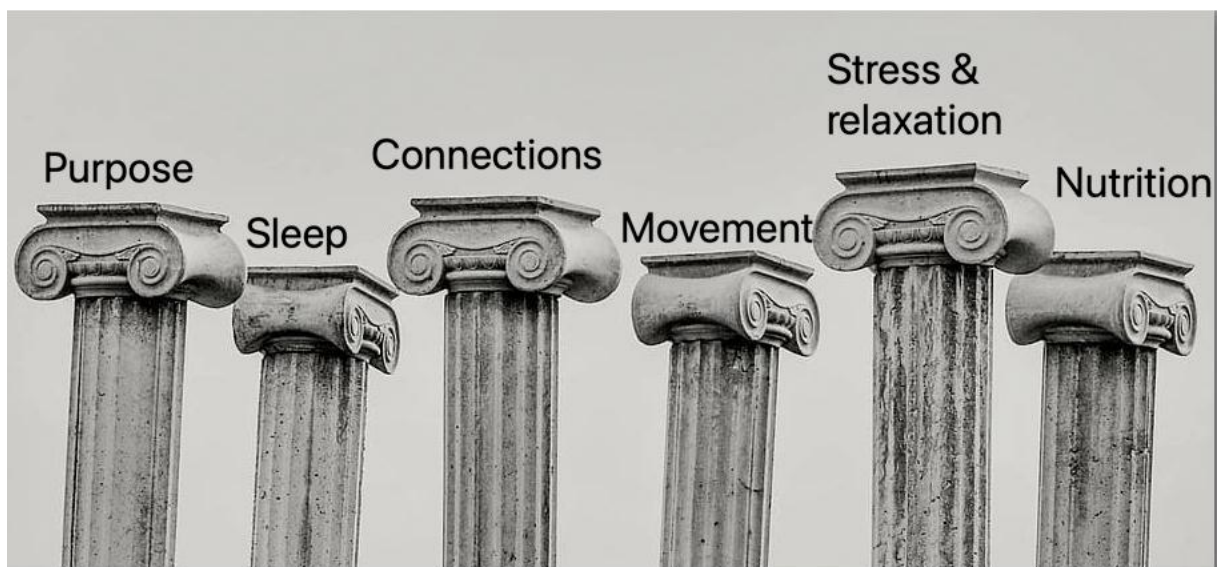
Take a moment to pause and reflect on a simple but powerful truth:

everyday habits drive most chronic disease risk, progression, and recovery.

Nutrition, physical activity, sleep, stress, social connection, and ‘having a purpose’ shape health outcomes just as meaningfully as many medications and procedures. Lifestyle medicine is not an “add-on” or a wellness trend—it is foundational, evidence-based care that sits at the heart of modern healthcare.

For healthcare workers, this message applies to us as much as to our patients. The demands of clinical work can make self-care feel optional or out of reach, yet our own habits directly affect our energy, resilience, decision-making, and long-term health. Small, realistic changes—better sleep routines, more regular movement, nourishing food choices, or moments of recovery during the day—can have a cumulative impact. Looking after ourselves is not a luxury; it is part of sustaining a healthy workforce and delivering safe, compassionate care.

Lifestyle medicine also belongs in everyday clinical conversations. Not every patient needs a full lifestyle consultation, but many benefit from a simple question, brief encouragement, or practical suggestion woven into routine care. When we consistently acknowledge the role of daily habits—alongside medical treatment—we normalise prevention, empower patients, and support long-term change. As we move into 2026, let’s continue to treat lifestyle medicine as what it truly is: core medicine, for our patients and for ourselves.



1. Ask yourself- which pillar do I need to focus on, for myself, today?
2. Is there enough space and freedom in my workplace to recognise the need for good self-care practices?

Lifestyle medicine is core medicine- yet few of us have received any formal training.

Many of us trained in a traditional NHS model of managing long-term conditions, where care has focused on diagnosing disease, prescribing medication, monitoring biomarkers, and responding when things worsen. While this approach remains important, it is no longer sufficient on its own.

Long-term conditions are largely driven by lifestyle, environment, and behaviour, and managing them effectively requires a shift from “doing to” patients toward working *with* them.

This means moving beyond advice-giving and targets, and instead supporting patients to understand their own health, explore what matters to them, and make realistic, sustainable changes in the context of their lives.

It asks us to develop skills in listening, behaviour change, and shared decision-making, and to see prevention, wellbeing, and self-management as integral parts of high-quality NHS care—not optional extras.

And Finally



At the Living Well Course, we have been training clinicians for 4 years. We recognise the challenge each of us faces in finding new ways of working to encompass Lifestyle Medicine as a core of our practice.

We have new courses running this year (invitations will be sent out shortly). And if you, your practice or PCN would like some more focussed training to develop a course for you and your team, please get in touch

Jen

Disclaimer: The information provided in this newsletter is for educational and informational purposes only and is not intended as medical advice. Always consult with a qualified healthcare provider before making any changes to your diet, exercise routine, or health care regimen. The content shared here is based on current research and best practices in lifestyle medicine, but individual needs and conditions may vary. The author is not responsible for any adverse effects or consequences resulting from the use of any suggestions, preparations, or procedures discussed in this newsletter. Jen West