

# LIFESTYLE AS MEDICINE

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WELCOME | LIFESTYLE AS MEDICINE | HEALTH |  
ENGLAND



## 26 Lifestyle Messages for 2026

**3. Health is more than biomarkers** – patient wellbeing, function, and quality of life matter just as much as numbers.

I often have a patient booked with me ‘to discuss results’. This may be a raised HbA1c or cholesterol.

But just as frequently, it is a series of results that are just outside the ‘normal range’ - haematocrit slightly high (or low), white cell count marginally low following a viral illness. We end up having a long conversation about numbers that barely matter- and run out of time to discuss to discuss what really matters.

**AND PCOS Part 2: How do the metabolic changes of PCOS affect men?**

### **In primary care, we are surrounded by numbers.**

Blood pressure targets. HbA1c thresholds. BMI categories. Cholesterol ratios. Risk scores. Dashboards. Alerts.

These biomarkers matter—they guide diagnosis, inform treatment, and help us track disease. But they are not the whole story. And when they become *the* story, we risk missing what truly defines health for the people we serve.

#### **Health is more than biomarkers.**

It is about how someone feels, functions, and lives.

#### **Sometimes “good numbers” don’t mean good health**

Many of us have seen it:

- A patient with “controlled” diabetes who is exhausted, isolated, and overwhelmed
- A person whose blood pressure is within range but who no longer leaves the house
- A frail older adult meeting clinical targets while steadily losing independence

The numbers look reassuring. The lived experience does not.

120/78

196/103

BMI 23.8 BMI 40.5

HbA1c 38 or 75

## What patients tell us matters most

When patients talk about their health, they rarely lead with lab results. They talk about:

- Pain and fatigue
- Confidence, mood, and motivation
- Ability to work, care, move, or socialise
- Feeling heard, supported, and understood

Function, wellbeing, and quality of life are not “soft outcomes.” They are often the *outcomes that matter most*.

## Primary care is uniquely placed to see the whole person

Across our teams—GPs, nurses, health coaches, social prescribers, and paramedics—we are already doing this work:

- Exploring goals, not just targets
- Supporting behaviour change, not just compliance
- Addressing social, emotional, and practical barriers to health
- Recognising that progress is not always linear—or measurable in a blood test

This whole-person approach is not an “extra.” It is core to effective, sustainable care.

## Reframing success

Alongside asking “*Are the numbers improving?*” we might also ask:

- Is this person functioning better day to day?
- Do they feel more confident managing their health?
- Has their quality of life improved—even if the biomarker hasn’t shifted yet?

Sometimes stabilisation, coping, or small functional gains are meaningful wins.

## A shared responsibility

Valuing wellbeing and function does not mean abandoning clinical standards. It means **holding both truths at once**:

- Evidence-based medicine **and** person-centred care
- Population metrics **and** individual goals
- Targets **and** humanity

As primary care professionals, our greatest strength is not just what we measure—but what we notice, listen to, and respond to.

Because at the end of the day, patients don’t live in spreadsheets. They live in bodies, families, communities, and real lives.

## The Health Numbers worth knowing:

(an information sheet for patients)

**You don't need to know every number. Just the ones that help you stay well.**

### Helpful numbers to know:

- **Blood pressure** – because it affects your heart, brain, and kidneys
- **Blood sugar / HbA1c** – to understand diabetes or future risk
- **Cholesterol (or heart risk)** – part of your overall heart health picture
- **Weight or waist size** – as one indicator of health, not a judgement
- **Smoking status** – stopping at any age improves health

### Just as important as numbers:

- Can you do daily activities comfortably?
- Do you have enough energy for the things that matter to you?
- Are pain, breathlessness, or low mood limiting your life?

 **Numbers should help you make decisions — not make you feel judged.**

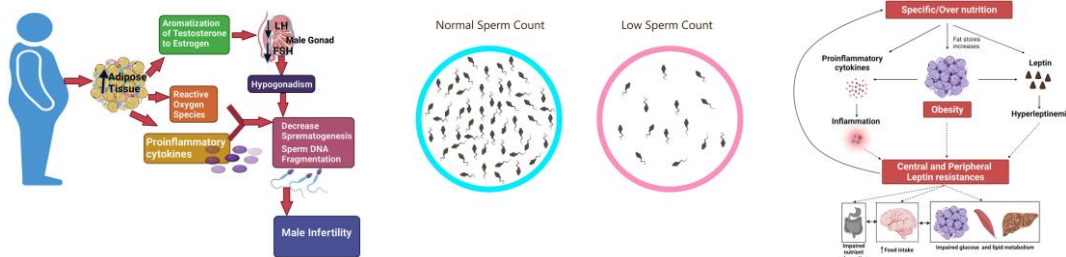
Always ask: *“What does this mean for me?”*

My numbers	Date:.....	Date: .....
Blood pressure		
Waist		
Weight		
BMI		
HbA1c		
Smoking		
Total cholesterol		
LDL or nonHDL cholesterol		
<b>And some not-numbers</b>		
Can I climb a flight of stairs?		
Do I have enough energy?		
Am I bothered by pain or breathlessness?		
Does my mood limit what I can do?		

Last week we talked about PCOS- a condition that only affects women, as the name of the condition focuses on Ovaries.

So what about men? How is male health affected by the same metabolic changes?

Male fertility is declining – obesity is a key driver



### What we're seeing

- Male sperm counts and testosterone levels have fallen markedly over recent decades.
- Over the same period, **overweight and obesity in men have increased sharply.**
- These trends are strongly linked.

### Why excess weight matters

Obesity impairs male fertility through several mechanisms:

- **Hormonal disruption:** adipose tissue converts testosterone to oestrogen → ↓ total and free testosterone.
- **Insulin resistance & inflammation:** suppresses the hypothalamic–pituitary–gonadal axis.
- **Sperm quality:** lower count and motility, abnormal morphology, increased DNA fragmentation.
- **Thermal effects:** increased scrotal temperature reduces spermatogenesis.

### Clinical implications

- Subfertility may be an **early sign of metabolic disease** in men.
- Many cases represent **functional, potentially reversible hypogonadism.**

### Key message for practice

*Male fertility is a metabolic health issue — not just a reproductive one.*

Addressing weight, insulin resistance, sleep, alcohol, and physical activity should be **first-line**, alongside fertility investigations.

Reference: [Male adiposity, sperm parameters and reproductive hormones: An updated systematic review and collaborative meta-analysis - PubMed](#)

## *And Finally...*

... every time I send a patient for 'tests'- especially blood tests- I can feel bamboozled by the results. And I've been a GP for a l-o-n-g time. Does it matter that this test is ever so slightly below (or above) the normal range? Which results are the most important?

As clinicians, yes, we need to pay attention to the numbers. But we also need to communicate to patients which numbers really matter. So I hope you find the 'Health numbers worth knowing' handout useful. It's attached as a separate PDF so that it can be printed or sent to patients.

And absolutely finally... talking about PCOS last week got me thinking 'what does this mean for men'. So there's a page about 'men and PCOS' in this week's newsletter.

*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

Back issues of newsletter available. Please ask if you would like any of these.

26 Lifestyle Messages for Healthcare Workers

1. Lifestyle medicine is Core medicine
2. Small changes matter.