

Wellness
FOR THE
Glory
OF
God

LIVING WELL AFTER 40
WITH JOY AND CONTENTMENT IN ALL OF LIFE

John Dunlop, MD

“This is a fascinating book filled with rich, practical wisdom from the Bible and from a lifetime of treating thousands of patients. Highly recommended!”

Wayne Grudem, Research Professor of Theology and Biblical Studies,
Phoenix Seminary

“This book is full of strategies for life’s second half. Its advice is practical and priceless.”

David Stevens, CEO, Christian Medical and Dental Associations

“Dr. Dunlop speaks from a wealth of personal experience as a beloved physician to countless older people, watching them live and die well—and poorly. A lifelong and careful study of the Bible has given him an invaluable perspective on how to ‘run with endurance the race that is set before us.’ We long to keep up, and even to excel, but how? If you want a wealth of biblically sound and immensely practical strategies for staying well, you’ve come to the right place. This book is a treasure!”

John F. Kilner, PhD, Professor of Bioethics and Contemporary Culture and
Forman Chair of Ethics and Theology, Trinity Evangelical Divinity School

“In today’s busy medical practice, doctors rarely have the time to sit down and share all the advice needed to keep patients well. Here, in one volume, Dr. Dunlop has collected everything I wish I had time to teach my patients.”

Harry Kraus, MD, board-certified surgeon; best-selling author, *Lip Reading*
and *Domesticated Jesus*

“A deep reading of the book reveals many pearls that the disciplined and attentive physician John Dunlop has uncovered over the years of taking care of elderly patients and observing their lives, as well as his own. This book will challenge your thinking and your doing.”

D. Joy Riley, MD, MA, Executive Director, The Tennessee Center for
Bioethics and Culture; author, *Outside the Womb* and *Christian Bioethics*

“The desire to be well and the reading of Dunlop’s book run on parallel tracks. Heading into their senior years, readers who don’t have the time or the expertise to thoroughly research the issues facing them—issues about which they must make decisions before it’s too late—will find this a well-organized and right-sized aid. I found his brief section on dementia and memory loss especially helpful.”

Sam Crabtree, Executive Pastor, Bethlehem Baptist Church, Minneapolis,
Minnesota; author, *Practicing Affirmation*

“Refreshingly holistic and consistent with the biblical concept of *shalom*, rather than the material-spiritual dualism so common in contemporary Christian thought, Dunlop addresses not only physical and mental wellness but also social, financial, spiritual, and emotional wellness. I’m already applying some of its lessons and pray many others will use it to help them improve the extent to which they live well for the glory of God!”

Sharon A. Falkenheimer, MA, MD, MPH, Associate Fellow of the Center for Bioethics and Human Dignity, Trinity International University; Clinical Assistant Professor in the Department of Preventative Medicine and Community Health, The University of Texas at Galveston

“Drawing from decades as a caring and compassionate physician, Dr. Dunlop shares insights and strategies about life choices that result in successful aging. He provides actual patient vignettes, which clearly illustrate the biblical basis for wellness and wholeness that go beyond just physical health. He challenges readers to prayerful self-examination that can lead to sound and lasting change. His tone is pastoral and personal, as if he were sitting alongside the reader and gently counseling. The chapters are sprinkled with humor and include many good references for those who want deeper understanding. This book encompasses all we need to hear from someone who is wise and godly.”

Clydette Powell, MD, MPH, FAAP, Associate Professor of Pediatrics, Division of Child Neurology, The George Washington University School of Medicine and Health

Wellness for the Glory of God

Also by John Dunlop:

Finishing Well to the Glory of God: Strategies from a Christian Physician
(2011)

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 **CROSSWAY**
WHEATON, ILLINOIS

Wellness for the Glory of God: Living Well after 40 with Joy and Contentment in All of Life

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Published by Crossway
1300 Crescent Street
Wheaton, Illinois 60187

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Cover design: Faceout Studio

First printing 2014

Printed in the United States of America

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Trade paperback ISBN: 978-1-4335-3812-4

ePub ISBN: 978-1-4335-3815-5

PDF ISBN: 978-1-4335-3813-1

Mobipocket ISBN: 978-1-4335-3814-8

Library of Congress Cataloging-in-Publication Data

Dunlop, John, 1947–

Wellness for the glory of God : living well after 40 with joy and contentment in all of life / John Dunlop, MD.

pages cm

Includes bibliographical references and index.

ISBN 978-1-4335-3812-4 (tp)

1. Middle-aged persons—Religious life. 2. Well-being—

Religious aspects—Christianity. 3. Quality of life—

Religious aspects—Christianity. I. Title.

BV4579.5.D86

2014

248.8'5—dc23

2014006666

Crossway is a publishing ministry of Good News Publishers.

VP 24 23 22 21 20 19 18 17 16 15 14
15 14 13 12 11 10 9 8 7 6 5 4 3 2 1

To my patients and
coworkers in Zion who
have been my friends
and teachers

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Introduction

Henry came into the examining room huffing and puffing, using his walker to get down the hall. I shook his hand and asked, “How is it going my friend?” Smiling, he gave me a strong handshake and said, “Praise the Lord, I’m well, thank you!” As pleased as I was to hear his response, it caught me just a bit off-guard. I was sixty-five; he was ninety-five! I found myself wanting to be like that thirty years from now. Then all kinds of questions began to pop into my mind:

- What does it mean to be well at ninety-five: short of breath and using our walkers?
- Will I be able to say I’m well if I am still on earth at that age?
- What can I do now to increase the chance of being well in thirty years?

Having practiced medicine, with a special emphasis on geriatrics, since 1976, I have seen a lot of folks move through their older years. A significant percentage of my patients are Christians. I am impressed at how different the later days of life can generally be for those who embrace faith in Christ compared to those who do not. However, there are no universal rules for growing old successfully. Some, Christian or not, seem to thrive and continue to grow as life’s end approaches; others slowly fade away without joy or a sense of completion. I am fully aware that much of what makes the difference between the two is outside of man’s control. Yet I am equally convinced that some is within man’s control. I often

tell my patients that the difference between ninety-five-year-olds in the nursing home and those on the golf course is the choices they made in their sixties. That is what this book is about.

What strategies can we who are getting older adopt that will maximize our chances to endure the challenges of our later days and continue to be well? The essence of this book is expressed in the title. Wellness depends on living with a purpose that goes beyond the here and now. Over and over I have seen that one way in which Christians can stay well in their twilight years is to keep their focus on God, his greatness, and his glory.

Born in 1947, I am well into my second half of life. That makes me a Baby Boomer, a member of the generation that arrived between 1946 and 1964. I suspect that many of you are Boomers too. As Boomers, we are close to retirement and confronting the fact that our lives are more than half over. I remind my patients that getting older means two things: first, we are not old yet, but we're getting there; and, second, we're not dead yet! They say, "Old dogs can't learn new tricks." That may be true, but remember that we are still just *getting* older, so there is time to change. If we are going to age successfully, we need to think carefully about what we want to be like when we are old, take stock of where we are now, and develop strategies to move us from here to there. We need to consider all domains of wellness to get a complete picture.

In this book we will examine physical, mental, social, financial, spiritual, and emotional wellness. As you read, I will share stories of people who are quite old and doing well. Many of these are real people, though their names are altered. In some cases I have combined several stories to make a point; others are purely fictitious. These examples allow us to see what being well in the later years can look like and what strategies we can implement now to increase our chance of continuing to be well.

There is great value in our older years. They are an important part of our lives. We dare not look at these years as putting in time

till God calls us home. That unfortunately may be the default of our culture, but as Christians we must not allow that thinking. The changes we experience as we age are nothing to be embarrassed about. No! Proverbs 16:31 tells us, “Gray hair is a crown of glory.” The effects of aging are clear evidence of God’s blessing. Even our increasing dependence on others need not deny our intrinsic value. We must see our value as rooted in the fact that we are made in God’s image and redeemed by Christ, not in what we can accomplish. For way too long, we have faced getting older with some degree of apprehension and dread. Now it is time to see a more positive picture. Statistically, our generation is likely to live longer than any generation since ancient times. God does not make mistakes. He is allowing this longevity for a definite reason. We need to find the purpose he has for our older years and pursue it with vigor.

I have a lot to share with you and want to propose a number of strategies for you to think over. I am writing as if you were one of my patients, and we are chatting together at my office. I love such conversations, but often there is just too much to talk about in the limited time we have together, so I have put these suggestions in writing for you.

This book is not intended to be a comfortable read. Even while writing I have been challenged to make some changes in my own life. I pray that these thoughts will challenge you as well. As I share my strategies with you, stop, think, and pray that God will show you how you are doing in that area. When you think of changes you need to make, turn to the back of the book where you can write down specific steps to take. Make yourself accountable and write down dates by which you feel you can make the change. Don’t limit yourself to the suggestions I make. Allow God, by his Spirit, to speak to you and prompt you about other necessary changes.

You will note that this book is written specifically for and about Christians. If you are truly a Christian, I trust you will find these chapters encouraging as you look forward to further years knowing God on this earth and, even more, to spending your eternity

with God in heaven. Some of you have lived a “good Christian life” but find that the way of life I am talking about here goes far beyond your experience. I would urge you to find a godly pastor or friend and talk over your reactions.

Perhaps you do not view yourself as Christian. Please read on, for many of the strategies I present are equally valid for you, and perhaps you will see that the Christian faith makes sense and that there is a lot of wisdom in the Scriptures I quote. Several friends suggested I write a book without a strong spiritual emphasis, yet I chose not to do so since a strong faith is critical to successful aging. I felt it imperative to write within a spiritual, and in this case, Christian, context.

A book like this never comes out of a vacuum. As you will see, I ground many of my strategies in the Bible. I trust you will see the quotes as illustrative of what the Bible teaches as a whole and not just as isolated passages intended to prove my point. I had the privilege of growing up under the tutelage of wise and godly parents who had a lasting impact on my life. My years of medical practice allowed me to observe how many patients stayed well to the glory of God, and I learned much from them. Though it seems ironic to say, many were quite well when they died.

It is impossible to give individual credit to many of the dear friends whose impact I have felt, but, without a doubt, God has greatly used them to shape the thinking expressed in this volume. I owe a significant debt to each. One who deserves specific mention is Dr. Charles (Chick) Sell, who has spent countless hours helping me put “doctor talk” into writing that you can understand. I am also indebted to my wife, Dorothy, my two sons, Jamie and Rob, and friends such as Rose Bowen, Nate and Sharon Hale, and Donna Crum, who have read the manuscript and offered wise counsel. Finally, I want to thank Lydia Brownback of Crossway for her careful editing.

Before we get into our first chapter, take a moment and reflect on the challenge we have in the Scriptures:

Do you not know that in a race all the runners run, but only one receives the prize? So run that you may obtain it. Every athlete exercises self-control in all things. They do it to receive a perishable wreath, but we an imperishable. So I do not run aimlessly; I do not box as one beating the air. But I discipline my body and keep it under control, lest after preaching to others I myself should be disqualified. (1 Cor. 9:24–27)

Therefore, since we are surrounded by so great a cloud of witnesses, let us also lay aside every weight, and sin which clings so closely, and let us run with endurance the race that is set before us. (Heb. 12:1)

Life really is like a race, and, as any runner knows, the end of the race is the hardest. Think for just a moment about who is there at the finish line. It is Jesus, the one who died for us. As soon as we cross the finish line, we will be invited to “enter into the joy of [our] master” (Matt. 25:21). But even as we run, we are surrounded by a great cloud of witnesses who have already finished their race. The church triumphant is cheering us on. I can almost hear them shouting, “Stay well! Run hard! It won’t be too much farther.” My prayer is that you will find in this book useful strategies to stay well to the end, so that God will be glorified in your life and in the lives of those who are watching you.

Prayer

Father,

I am attracted to the concept of staying well to the glory of God. Speak to me through your Word by your Spirit as I read and help me examine my life to know what changes I need to make. Renew my passion for you. Help me to offer the remaining days I have on earth as a sacrifice to you. Give me wisdom; show me the way. Grant me strength to run hard to the end and allow me to experience joy along the way. May it all be to your glory.

Amen

Physical Wellness

A HEALTHY LIFESTYLE

At fifty-five, Pete was feeling great. His youngest had just left for college, and he and his wife were starting to enjoy their empty nest. With six weeks of paid time off from his stressful job, he and Jennie were planning to make the most of them. Having always wanted to travel abroad, they now had their chance. That is, until Pete came in for a physical. He had not been exercising and was about fifty pounds overweight. He had started to notice some discomfort in his chest after climbing more than two flights of stairs. In his routine exam he had some blood in his stool. His lab work revealed iron deficiency anemia, and his electrocardiogram showed some worrisome changes. It was off to the cardiac stress lab, where Pete's nuclear study revealed that a significant part of his heart muscle was not getting enough oxygen. After another test showed that several of his arteries were clogged, he underwent a four-vessel bypass operation. As he was recovering from that, he had a colonoscopy, which showed a premalignant polyp that had been oozing blood. It was removed without surgery.

Take Good Care of Your Body

Suffice it to say that Pete and Jennie had a major wake-up call. Their diet changed dramatically. No longer were there steaks on the grill every weekend. Breakfast was not sausage and eggs. Fast food became a thing of the past. Up at six o'clock every morning, they did a two-mile walk before Pete left for work. Over the next

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year Pete lost those extra fifty pounds and couldn't believe how much better he felt. At the time of his next annual physical he was a totally different person. I remember seeing him beaming as he pointed to the new holes in his belt. What a transformation Pete had made. I was waiting for his next words, and, sure enough, they came as I would have predicted: "John, why didn't I make these changes years ago?"

Physical wellness is rarely related to a single factor. Some of its roots are beyond our control, perhaps hidden in our genes. Some are simply the results of living in a world where bad things happen. Yet many are the predictable consequences of the poor choices we make. In this chapter, it is these preventable things that I want to focus on.

It intrigues me that a healthy lifestyle is rarely rocket science, and most of us have a general idea of how to maintain one. Rarely is the problem not knowing what to do. More often, it is not having the will to do it or, even more frequently, the discipline to stick to it. I am never certain how to motivate my patients to change their lifestyle. Often it takes a distressful wake-up call such as the one that shocked Pete, but sometimes even that is not enough. Since education can help us understand what to do, I will try to offer you some practical ways to avoid such a crisis and stay as healthy as possible. Education can also allow us to understand some of the consequences of not doing what we should. But for Christians, I believe there is a much stronger reason to do what we can to stay healthy. Allow me to set the background from Scripture.

In Old Testament times God took up residence in the tabernacle, where the cloud of his glory was present above the ark of the covenant. He gave very explicit instructions for the care of the tabernacle. Later the ark was moved into Solomon's temple, where God's presence remained until the prophet Ezekiel saw God's glory leave. God did not take up a specific residence on earth until the time of Christ's incarnation. Then he was present in the person of

Jesus. When Christ ascended back to the Father, the presence of God returned to man when his Spirit came at Pentecost to indwell believers. Now he lives in us. “Or do you not know that your body is a temple of the Holy Spirit within you, whom you have from God? You are not your own, for you were bought with a price. So glorify God in your body” (1 Cor. 6:19–20). We must be careful how we use the phrase “my body,” for in truth it belongs to God. He has entrusted its care to us. He expects us to keep it healthy, clean, and fit for his residence and use. There can be no pulling punches here—that is a very strong reason to pursue physical wellness. Paul wrote, “I discipline my body and keep it under control” (1 Cor. 9:27). That is exactly what we need to do. Therefore, our first strategy toward wellness for *the glory of God* is to adopt a healthy lifestyle.

Guidelines for Healthy Living

So how do we go about taking good care of our bodies? Good physical health results from following some basic guidelines.

Manage Your Weight

Weight is a major health problem for many and has now reached epidemic proportions. Obesity can lead to diabetes, arthritis, premature heart disease, stroke, and many forms of cancer. In short, it compromises both the length of our lives and our ability to keep active. I am not sure we have a clear scientific understanding of all the root causes of obesity. I suspect that there may be as many causes of obesity as there are people who suffer from it. For some, it is financial: foods that lead to obesity are cheaper. For others, it is a community problem: there are no safe places to exercise. For others, the causes are hormonal or genetic. There is

STRATEGY

Take good care of your body,
for it is the temple of the
Holy Spirit.

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good evidence that inadequate sleep leads to obesity. In certain cases, obesity comes from eating behavior passed on through family traditions. In other cases, people eat too much in response to stress or depression. Obesity can even be a spiritual problem, when we seek in food the satisfaction that we can find only in the Lord. While the causes are multiple, the treatment always boils down to first identifying and dealing with the root cause and then figuring out some way to burn more calories than we consume. It may be easier when we recognize that some calories are more satisfying than others. There is no question that a one-hundred-calorie serving of broccoli is much more filling than one hundred calories of butter. I encourage my patients to use a calorie-restricted diet and to exercise to lose weight and keep it off. Although necessary, I admit it is not easy.

Get Plenty of Exercise

I have on my desk a card that quotes Robert Butler, a specialist in geriatric medicine. It simply says, “If exercise could be packed in a pill, it would be the single most widely prescribed and beneficial medicine in the nation.” Dr. Butler highlights two things. First, exercise is of inestimable value; and, second, we prefer to take pills for everything that ails us because they are the easier solution. Fundamentally we are lazy.

But how much exercise is enough? For many of us, the answer seems to be “Just a little bit more.” Yet as little as twenty minutes a day or 150 minutes a week will help maintain good health, and twice that will help you lose weight. Our exercise should take four forms: aerobic to keep us moving and keep our hearts healthy; anaerobic for muscle toning; stretching; and balance training. We should keep in mind that none of these needs to be a formal gym workout. The key is to keep physically active while doing something we enjoy. It is also important to choose activities that we can do year-round. As we age, our approach to exercise will inevitably

change; but we should realize that poor health is rarely a reason not to keep physically active.

When it comes to aerobic exercise, I have traditionally gone beyond the minimum and recommend three hours a week, or thirty minutes six days a week. A brisk thirty-minute walk accomplishes that, but there are many other options from which to choose. It also helps to do more standing than sitting. Standing by itself burns more calories than sitting and improves muscle tone and balance. Try standing for activities that you presently do while sitting, such as talking on the phone or watching TV. One comedian quipped that the answer to the obesity problem in this country would be to require that TVs be powered by treadmills. Inactivity is very detrimental to health and shortens life expectancy. One of my patients frequently tells me that he will always keep active and then adds, “You know, if I lie down, they will start throwing dirt on top of me.”

In addition to maintaining aerobic activity, it is important to do anaerobic muscle-toning exercise. Some may be familiar with osteoporosis, the all-too-common loss of calcium from bones, or its milder form, osteopenia. Fewer are aware of sarcopenia, the age-related loss of muscle mass, yet the statistics for the latter are disturbing.¹ Most of us reach our maximum muscle mass around age thirty and maintain it fairly well until our sixties. Then, unless we take deliberate efforts to reverse the trend, we start losing about 1 percent of our muscle mass each year. Of even greater concern: this loss rises 2 percent per year in our seventies and doubles during each subsequent decade so that it reaches 8 percent per year in our nineties.² It does not take much of a math whiz to recognize how much we have left when we get truly old. We must do some muscle-strengthening exercise throughout our lives. This can be done with a set of inexpensive dumbbells or walking with wrist weights. Do not do it the way one of my patients suggested: “I walk each day with my husband—he’s a dumbbell! Is that enough?”

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In addition to doing aerobic and anaerobic exercise, we should stretch and find ways to intentionally improve balance. Group-exercise activities such as Tai Chi or Pilates are excellent for these purposes. While traveling in Asia I have been impressed by seeing many elderly folks outdoors in the early morning doing Tai Chi as a group.

Diet

It is tough to know which is more important for maintaining good health: diet or exercise. There is no question, though, that prescribing the best diet is the more difficult to do. Part of the problem is that so many pet theories are touted that have little or no scientific basis.³ It is further complicated because the problem with diet is more often a lack of will than a lack of knowledge. Most of us know that a healthy diet is heavy on fruits and veggies, rich in fiber but otherwise low in starches (especially sugar and high-fructose corn syrup), moderate in protein, and low in fat. Yet eating this way can be challenging. It can be more expensive and is contrary to the way we were raised. Besides, this type of diet does not include our comfort foods and may be more difficult to prepare tastefully. Yet to be good stewards of the bodies God has given to us, we can and indeed must get our eating act together. I have found that the simplest and best solution is to control the portions that we eat and eliminate snacks and high-calorie beverages. I encourage people to identify their snack weaknesses and to stop buying them. It is easier to resist temptation in the grocery store than in the kitchen. As to portion control, I make several suggestions:

- Eat on a lunch plate, not a dinner plate, and take no second helpings.
- Never finish your dinner at a restaurant. Ask for a take-home box and put the extra food in it before you start eating, not after you are full.
- Stop eating when you are full, not when you have finished all of your food.

- Eat one-course meals; if you have a salad, make it your whole meal and no desserts.
- Drink two big glasses of water before you eat and drink water as your beverage with your meals.
- Avoid all beverages with sweeteners and be aware that artificial sweeteners make you hungrier and do not help you lose weight.
- Eat some denser foods such as nuts before you sit down to eat a large meal.
- Include more fiber in your diet. For years I have used a psyllium powder such as a generic form of Metamucil to get more fiber in my diet. A tablespoon prior to eating is a wonderful way to suppress the appetite.
- Drastically reduce your carbohydrate and sugar intake; they stimulate the secretion of insulin, which makes you hungrier.
- Chew your food well and eat slowly, putting your fork down between each bite.
- Concentrate on eating vegetables; they are often more filling than other foods.

In spite of these suggestions, many people still find it very difficult to achieve portion control. For the motivationally challenged, a group program such as Weight Watchers can be helpful.

Christians often ask my opinion on fasting as a means of weight loss. I do not recommend this, even though I believe strongly in fasting for spiritual reasons. In that context, it is a means of controlling the desires of the flesh in ways that allow us to find our greater satisfaction in God. From a medical point of view, prolonged (more than twenty-four hours) fasting takes a toll on our bodies and should not be used for nonspiritual ends.

STRATEGY

Find out your ideal weight
and lay out a plan
to achieve it.

Beyond weight control, there are two other aspects of good nutrition that we should consider: salt and cholesterol. We hear a lot about the problems associated with salt and are cautioned

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not to go overboard on its use. Still, only certain people need to be particularly concerned about their salt intake: many of those with hypertension and those with fluid-retaining conditions such as heart failure and kidney or liver disease. Most of us do not need to severely limit our use of salt. Cholesterol is a more pervasive problem. There are good data showing that the better your cholesterol level, the lower your risk of heart attack or stroke.

There are two numbers in the cholesterol test results (a lipid panel) to focus on. These are the LDL (bad) and HDL (good) cholesterol levels. The government guidelines recommend that the LDL be kept less than 130 for the general population and less than one hundred for those with established hardening of the arteries (having had a heart attack or stroke) and those with several other risk factors such as diabetes. Many cardiologists encourage their patients to try to obtain an LDL of seventy, hoping that the cholesterol already deposited in arteries will actually shrink. Rarely can cholesterol that low be obtained without taking medications. Anyone needing to lower their LDL level should attempt to do so by dieting before using medications. They should limit the intake of animal-based fat (red meats, high milk-fat dairy products), restrict cooking oils (other than olive, peanut, or canola), and avoid baked goods high in saturated fat. It is also helpful to consume more nuts, soy, oats, barley, and ocean-raised fish such as salmon.

To intelligently manage your cholesterol level, you will need to consider how low it needs to be. I have many high-cholesterol patients—even as high as 160—with no other risk factors for heart disease whom I do not encourage to take medications. I do encourage them to follow a low-cholesterol diet. A useful tool to help make the decision about using drugs for cholesterol is an Internet site called Framingham Risk Analysis. When you enter your age, cholesterol readings, and blood pressure, the program will give you your risk of having a heart attack or stroke within the next ten years. High-cholesterol visitors to this site might wish to enter

their numbers and then, for purposes of comparison, enter some really good numbers to determine how having better cholesterol levels might lower their risk.

I have seen numerous people on cholesterol-lowering drugs who, before starting treatment, had a less than 5 percent risk. After treatment, the risk has dropped to about 3 percent. What intrigues me is how individuals respond to those differences. They smile and say, “Wow, that is a 40 percent reduction. I want to stay on the drug.” Others say, “No way. That risk is so small without medications that I want to stop treatment.” Personally, I would side with the second group, but I like the fact that they are making their own decision. A low HDL is also a significant risk factor. Unfortunately, drug therapy is not very effective at raising an HDL. What does help is to increase the amount of aerobic exercise.

It seems that almost every day I see a patient who has heard about some particular diet that promises wonderful results for weight loss or better health. It has been my observation that if there are any benefits to these fad diets, they are experienced by only a minority. If they ask my opinion, I will frequently tell them that I do not see any danger in the diet, but if they do not see the promised results in a reasonable period of time, it is not worth staying with it. There are times when some of these fad diets may actually be dangerous, and it is worth checking them out with your physician.

There is also great interest in a wide range of diet supplements. Some of these are made from regular foods in which many of the nutritional values have been concentrated and purified. Using these can be effective. That said, I am skeptical of most nonfood-based supplements for which specific health claims are made. The amount of research demonstrating their efficacy is usually very scant, there are rarely studies of statistical significance proving their safety, and some may actually be harmful. For people taking prescription drugs, there are almost no studies looking at the in-

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teractions between these supplements and prescribed medications. I personally feel that the Lord made our food supply in such a way that a balanced diet gives us what we need, and when we take supplements by themselves, we may miss nutrients necessary for their safe metabolism.⁴

There are two supplements that I frequently recommend. One is a multiple vitamin for anyone who is not able to get a well-balanced diet. The other is calcium combined with vitamin D. Most female adults over fifty should be getting at least fifteen hundred milligrams of calcium a day and men about one thousand milligrams, through eating either dairy products or a supplement. Unless you are in the sun for at least an hour a week, you should take the equivalent of eight hundred units of vitamin D each day. Living in Chicago, I take five thousand units once a week from the first of November to the first of May.

Get Enough Rest

I have found that people rarely think about appropriate rest as being on a par with diet and exercise when it comes to keeping healthy or controlling weight. I am convinced it is and that most people do not get enough. Rest comes in two forms: our daily sleep and appropriate times away from the stresses of life. Sleep is critical. If you wonder if you are getting enough, ask yourself if you are sleepy while doing engaging activities during the day. If you fall asleep during a good sermon on Sunday morning, chances are that you are not getting enough sleep. Sleep deprivation often contributes to overeating and obesity since lack of sleep inhibits the hormonal signals that tell us it is time to stop eating.

Some take adequate time to sleep but find that restful sleep evades them. Frequent trips to the bathroom, sleep apnea, or lack of a quiet room in which to relax can contribute. Shift work can be very detrimental to good sleep. Many of these situations can be helped either by a primary-care physician or by a sleep specialist.

It is much wiser to approach sleep problems by seeking the root cause than by taking sleeping pills.

In the opposite sense, I find that many seniors often have trouble sleeping because they want more sleep than they need. They may take long naps in the day and then are not able to sleep at night. Others may get bored and go to bed too early and then complain that they wake up too soon. They may go to bed at 8:00 p.m. and are frustrated when they waken at 3:00 a.m. I remind them that we cannot force our bodies to get more sleep than we need and that getting too much sleep may make us feel lethargic and unmotivated.

Ben was in the other day, asking for a sleeping pill. As we talked, he told me that he goes to bed at 7:30 p.m. and watches TV until 10:00. He then sleeps fitfully until 6 a.m., finding those nighttime hours long and distressing. He then sleeps soundly from 6:00 until 9:00 a.m., often not getting up until noon. He regularly takes a two-hour afternoon nap. No wonder he can't sleep at night! We concluded that he did not need a sleeping pill but something to keep him busy during the day.

Besides getting enough sleep, we need to get away from the cares of our lives and enjoy some quiet and peace. Believing this is true, I have for many years taken Tuesday as a day off from my office. It gives me time to do other things, often including a long run. As a result, I feel less pressured the rest of the week. The biblical precedent of a Sabbath, taking one day out of seven to be renewed, is wise. In today's busy world we also do well to take several weeks off each year, if we are able.

STRATEGY

Consider whether you are getting enough sleep and time away.

When we do not have time to get proper rest, I suspect it is because we are filling our lives with activities that God has not called us to do. The psalmist wrote, "It is in vain that you rise up early

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and go late to rest, eating the bread of anxious toil; for he gives to his beloved sleep” (Ps. 127:2).

Avoid Unsafe Behaviors

Most of the time, we need to use our common sense to avoid unsafe practices. We don't need to be told not to smoke, to avoid excessive use of alcohol, and to wear our seat belts, bike helmets, or other protective gear when they are necessary. I wish that using a cane or walker did not have such negative associations for many of my patients. Regular use of such aids can help prevent broken hips or other injuries.

Seek Good Medical Care

CHOOSING A PHYSICIAN

I believe good medical care starts with finding a primary-care physician who is well trained, compassionate, easy to relate to, and shares your basic philosophy of medicine. Before you choose a new physician, do your homework. Try to get some referrals from friends. If you are new to a community I suggest that you find a nurse who can recommend a physician and then check out him or her on the Internet. Be sure to notice his specialty, whether he is board certified, where he did his training, and how long he has been in practice. Also, try to discover his theory of practicing medicine. Primary-care physicians, whether they are family practitioners or internists, will have different philosophies. Some will look on themselves as the quarterback of the team. They will refer you to various specialists who will give most of the care. Others will see themselves as offering a medical home, i.e., a single place where you can get most of your care. They view specialists as consultants who give advice but do not do the primary management. Frankly, I prefer the latter. I tell my patients that, without a doubt, the cardiologist

STRATEGY

Determine your unsafe behaviors.

knows more about their heart than I do; but I know more about them as people, a great asset when treating them.

I appreciate patients who schedule a first appointment to “meet and greet.” I would suggest some questions you may want to ask potential physicians if you cannot find the answer in other ways:

What is their philosophy for referrals? Do they expect most of your problems to be referred to specialists, or will they provide most of the care?

Do they prefer to manage chronic conditions with medications or with lifestyle changes?

If you are a Christian, explain that your relationship with God is very important to you. Can they respect that? You may even ask if they ever pray with or for patients.

What arrangements does the office have for providing emergency care?

If you require hospitalization, will the physician visit you, or will a full-time hospital physician be in charge?

Many of my patients are Christians, and I find it a joy to serve these fellow believers. They appreciate having a doctor who recognizes God’s hand in healing and is willing to pray for them. Personally, however, I would rather have a caring and competent non-Christian physician than choose a doctor simply because he or she is a believer.

PREVENTATIVE CARE

Medicine as a profession is placing greater emphasis these days on prevention. It’s about time. Many insurance policies now offer a yearly wellness visit without requiring any payment from the patient. This provides an opportunity to discuss many of the suggestions presented in this chapter with your physician. It also allows you to have your routine vaccinations updated, an important

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part of maintaining good health. I find it unfortunate that so many people refuse vaccinations, especially flu shots. These shots are very safe, and getting them not only benefits you but also may offer protection to others. Thinking of others in this way is a very “Christian” thing to do.

MEDICATIONS

Medications are available for many conditions, and we must look on them as a gift that God has given to us to defeat many of the illnesses that are part of living in a fallen world. After all, any healing is done by God, whether he uses medicines or not. When I write a prescription, I frequently ask my patients if they ever bow and give thanks for their food. Many say they do. I then ask them if, when they pray, they ever add the phrase “and please bless it to my body’s use.” Again, many do. I end by suggesting that they give thanks to God for their medicine and ask him to “bless it to their body’s use.”

Conversely, many drugs are overused. We tend to think we can treat any problem with a pill. Yet many illnesses could be more effectively dealt with through lifestyle changes, which are less expensive and have fewer side effects. I often quote one of my partners, who loves to say, “Medicines are poisons with a few good side effects.” Of course, however, there are many situations in which medications are indicated, and we should continue to use them as part of being good stewards of the bodies God has entrusted to us.

Often patients fail to take their medications

regularly. Even more troubling is how few of them are willing to acknowledge that to their physician. They say they are taking their pills every day, yet they fail to refill their prescriptions. Skipping one’s medication is like wearing a seat belt for only part of a trip.

STRATEGY

Review your use of medications.

Are you using them as a good steward should?

If you fail to take your medicines regularly, I urge you to discuss that with your doctor and give him or her the chance to address the issues involved. If finances are a barrier, there might be a less expensive option. If your problem is remembering to take a medication three times a day, your doctor might prescribe a once-a-day alternative.

Another major problem with medications is that some of them are addicting, particularly sedatives and opium-related painkillers. Prescription drug addiction is a massive problem in the United States. I cannot throw stones, for I have had patients acquire such addictions while under my care. Prescription addictions can occur when the doctor prescribes a stronger dose than is necessary or allows a patient to stay on a medication longer than necessary. One of the consequences of addictive painkillers is that over time they lead to depression and reduced pain tolerance. As a result, patients want stronger and more frequent drugs. By far the best solution for this situation is to never let it get started. If you need a strong painkiller for an acute situation, take as little as possible and get off it as soon as you can. Something nonaddicting such as acetaminophen (Tylenol), ibuprofen (Advil), or naproxen (Aleve) can be very effective. In situations where pain is intractable, it may be best to see a pain specialist.

SURGERY

Surgery can play a significant role in maintaining good health. Common geriatric surgeries include hip and knee replacements. I have had patients with severe joint problems who were literally imprisoned in their homes and forced into inactivity while their muscles deteriorated for lack of exercise. After joint replacement they became active again, not only free of pain but healthier overall and able to serve the Lord in new and productive ways. Just as I try to pray with patients before surgery, I often bow with them afterward to thank God for a good surgical outcome.

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The time to consider joint replacement is not necessarily when you are having pain but when the pain begins to interfere with your ability to function. The decision whether to have surgery is an individual one, and many factors must be considered before concluding that the potential benefit outweighs the risks involved. Rarely have I seen anyone regret their choice to pursue surgery.

CANCER

When it comes to cancer, be diligent with screening tests and pursue early and aggressive treatment. Most of us are procrastinators, which can be devastating when dealing with cancer. To care well for our bodies, we will faithfully submit to cancer-screening procedures such as mammograms and colon cancer screening and, in our younger years, prostate exams and pap smears. Most importantly, we will not ignore symptoms that could indicate cancer.

Health: A Blessing from God

Good physical health is a blessing from God. We should never take it for granted but should thank God daily for our health and take care of our bodies as temples of the Holy Spirit, for our bodies are not ours—they belong to God. If we understand that life is not about us but about God's glory, we will want to pursue health and endeavor to use it to do things that will bring God glory. That, after all, is the reason we want to stay healthy—making good use of our bodies. All too often, we think in terms of preserving our health so we can enjoy long years on this earth. That is rather short-sighted, for using our health to advance God's eternal kingdom is much more important than simply prolonging life on earth.

I have chosen to deal with the physical as the first area of wellness because it is a key topic that many are thinking about. The

reality of good physical health, however, is that even for those in the best shape, it will be fleeting, and of all the wellness domains we are considering, it is the most likely to elude us. The message of *Wellness for the Glory of God* is that we can continue to be well even as our physical health deteriorates. Wellness is not defined by what our bodies look like or what they can do. When considered from the perspective of each of the other domains of life, wellness can be much more fulfilling and deeply satisfying.

Questions for Reflection and Discussion

What is your current weight?_____ What would you say is your ideal weight?_____

How many hours a week are you engaged in brisk walking or other physical activity?_____

What would your goal be?_____

Do you do any muscle training with weights?_____

Are you stretching?_____

What do you do to improve balance?_____

How would you grade your diet? (A, B, C, D, or F)

Vegetables:_____

Fruits:_____

Low-fat dairy products:_____

How much of your meat intake is: high-fat red meats_____; low-fat red meats_____; chicken or turkey_____; fish_____; vegetable protein (tofu, etc.)_____

How many hours of sleep do you average each night? _____

Is that too little, too much, or just right? Circle the correct answer.

Wellness for the Glory of God

Circle the screening tests that you are due for: mammogram, pap smear, colon cancer screening, cholesterol.

Prayer

Lord,

You have given me a body and want me to take the best care of it that I can. I recognize that you are in control over everything, including my physical health. I know you have commanded me to be a good steward of my body. Being weak, I so often give in to temptations to do things that do not promote my physical well-being. I pray that you will give me the wisdom to know how to care for my body as well as the will power to do it. Allow me to use the strength you give me to do things for you and to set a good example for others. Most of all, I want you to be glorified through my physical health. I pray this for my own good and for your glory.

Amen

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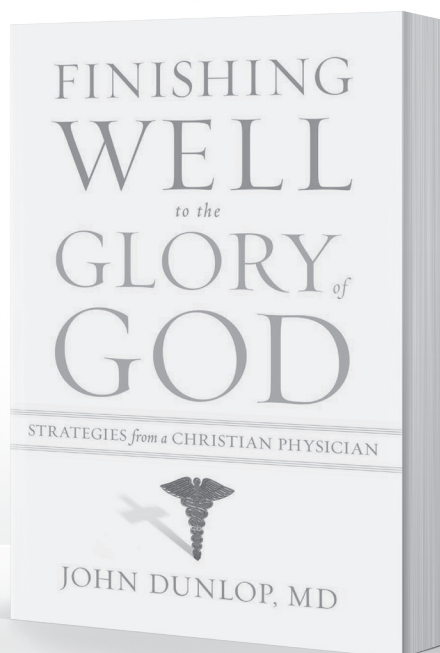
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