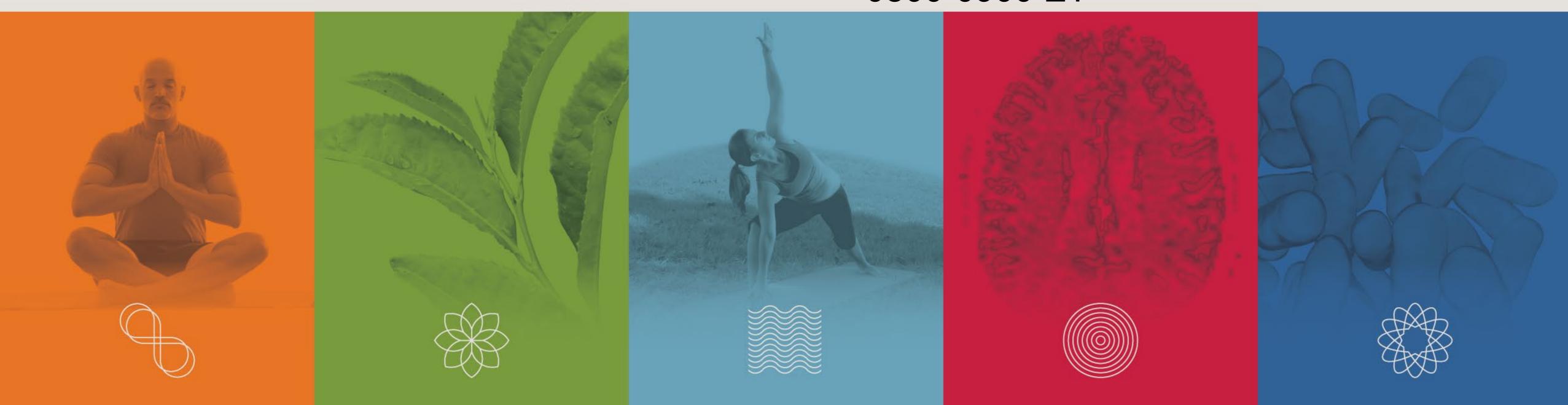


Introduction to the National Center for Complementary and Integrative Health's (NCCIH) Initiatives to Promote Whole Person Health

Helene M. Langevin, M.D.

15 September 2022 0800-0900 ET



Presenter

Helene M. Langevin, M.D.

Director

National Center for Complementary and Integrative Health (NCCIH) Bethesda, Md.







Helene M. Langevin, M.D.



Helene M. Langevin, M.D., is director of the National Center for Complementary and Integrative Health (NCCIH). As NCCIH Director, Dr. Langevin oversees the Federal government's lead agency for research on the fundamental science, usefulness, and safety of complementary and integrative health approaches and their roles in improving health and health care. With an annual budget of approximately \$150 million, NCCIH funds and conducts research to help answer important scientific and public health questions within the context of whole person health. The Center also coordinates and collaborates with other research institutes and Federal programs on research into complementary and integrative health. She is currently the chair of the Interagency Pain Research Coordinating Committee.

Prior to coming to the National Institutes of Health (NIH) in 2018, Dr. Langevin worked at the Osher Center for Integrative Medicine, jointly based at Brigham and Women's Hospital and Harvard Medical School, Boston. Dr. Langevin served as director of the Osher Center and professor-in-residence of medicine at Harvard Medical School from 2012 to 2018. She also previously served as professor of neurological sciences at the University of Vermont Larner College of Medicine, Burlington, Vermont.

Over her career, Dr. Langevin's research interests have centered around the role of connective tissue in chronic musculoskeletal pain and the mechanisms of acupuncture, manual, and movement-based therapies. Her more recent work has focused on the effects of stretching on inflammation resolution mechanisms within connective tissue. She is a fellow of the American College of Physicians. Dr. Langevin received an M.D. degree from McGill University, Montreal. She completed a postdoctoral research fellowship in neurochemistry at the MRC Neurochemical Pharmacology Unit in Cambridge, England, and a residency in internal medicine and fellowship in endocrinology and metabolism at The Johns Hopkins Hospital in Baltimore, Maryland.

Disclosures

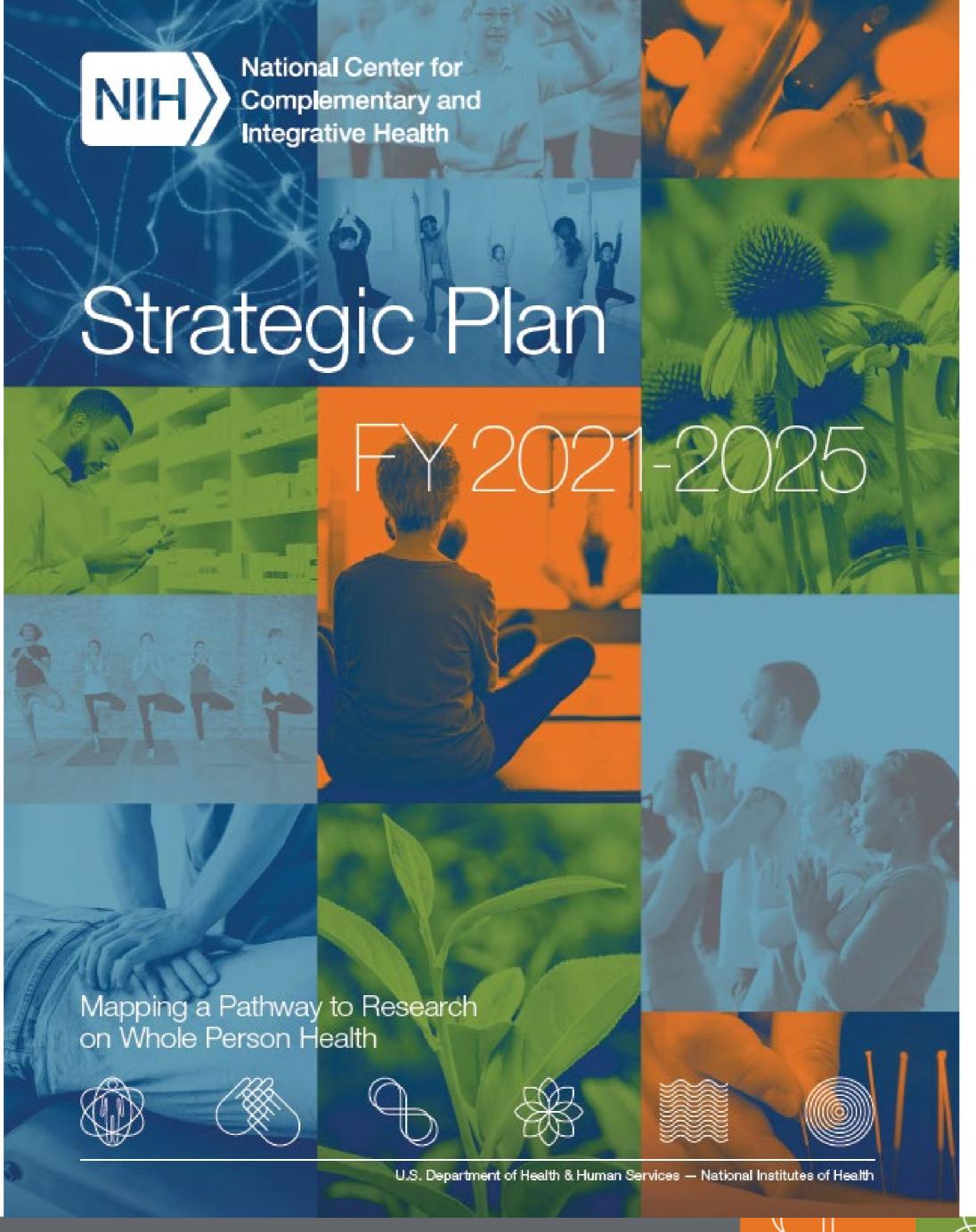
- Dr. Langevin has no relevant financial or non-financial relationships to disclose relating to the content of this activity.
- The views expressed in this presentation are of those of the author and do not necessarily reflect the official policy or position of the Department of Defense, nor the U.S. Government.
- This continuing education activity is managed and accredited by the Defense Health Agency, J-7, Continuing Education Program Office (DHA, J-7, CEPO). DHA, J-7, CEPO and all accrediting organizations do not support or endorse any product or service mentioned in this activity.
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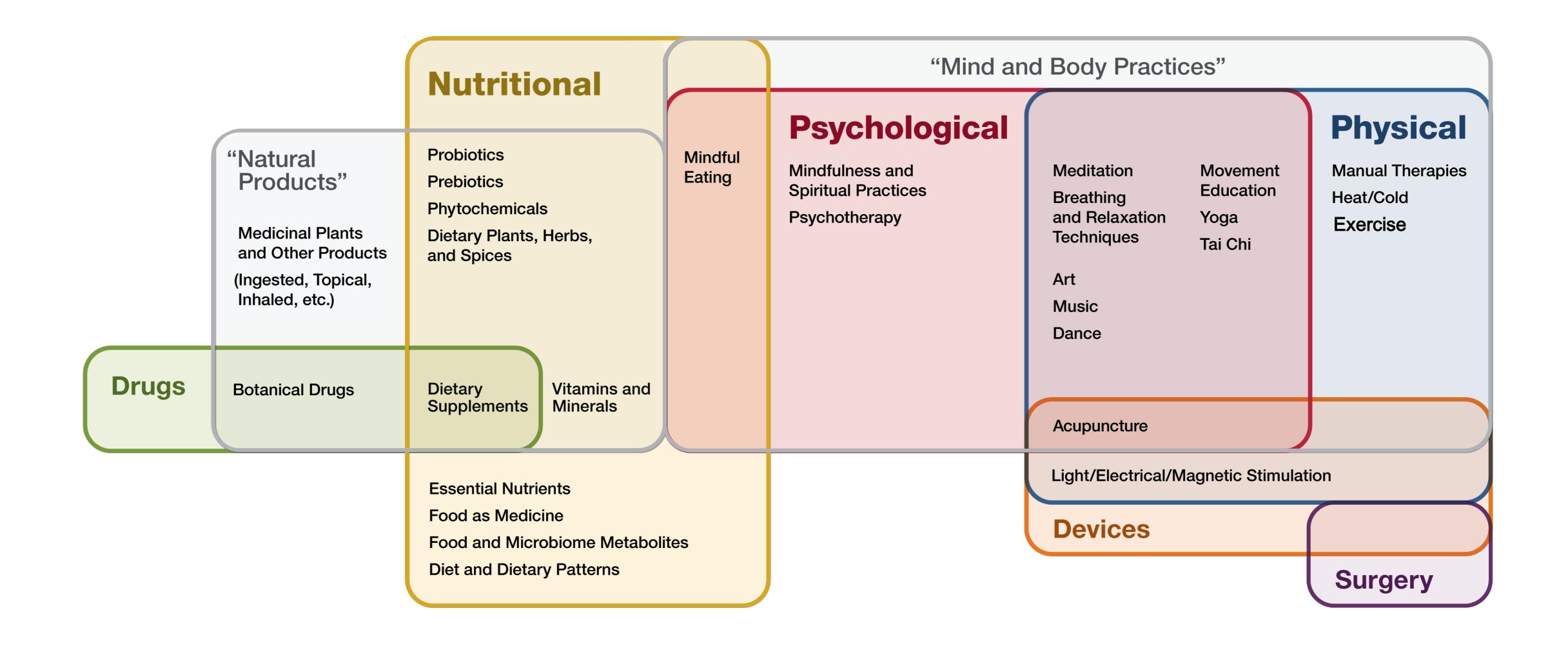
Learning Objectives

At the conclusion of this activity, participants will be able to:

- 1. Review the NCCIH Strategic Plan, objectives, and priorities.
- 2. Outline the current NCCIH initiatives and funding opportunities related to whole person health.
- 3. Describe the importance of rigorous methodologies and measures to examine the impact of multi-component interventions on multi-system or multi-organ outcomes.



NCCCH





Includes complementary therapies, practices, and systems that use nutritional, physical, and/or psychological approaches and may have originated outside of conventional medicine

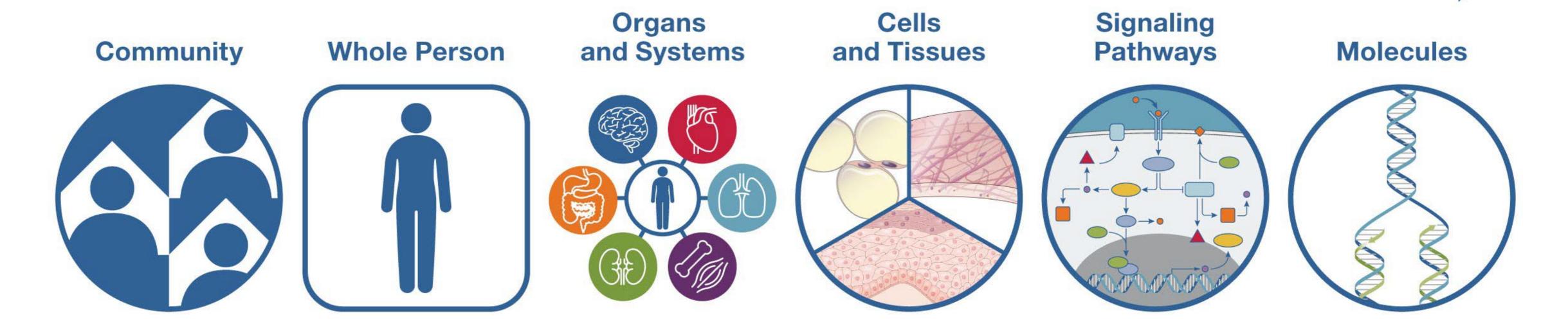
NCC(J)H

Whole Person Health

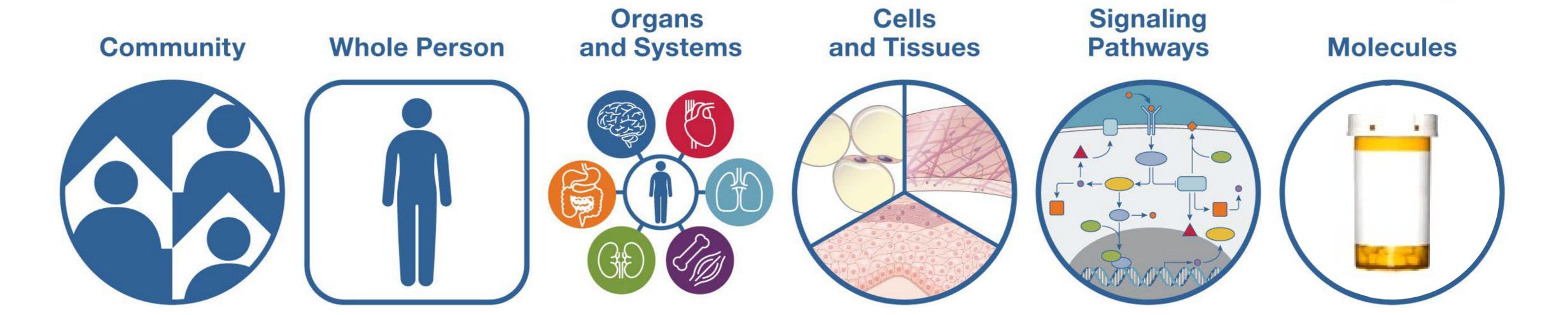




Analysis

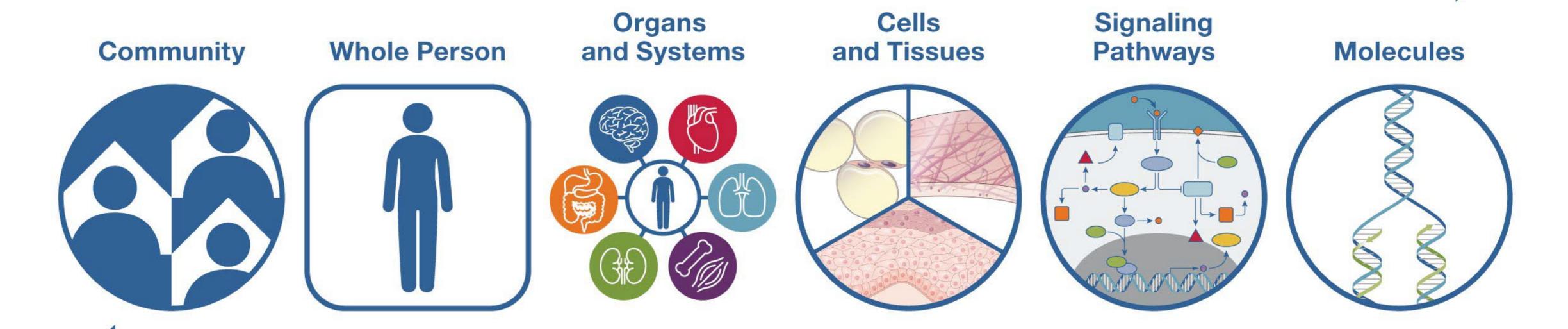


Analysis



National Center for Complementary and Integrative Health

Analysis

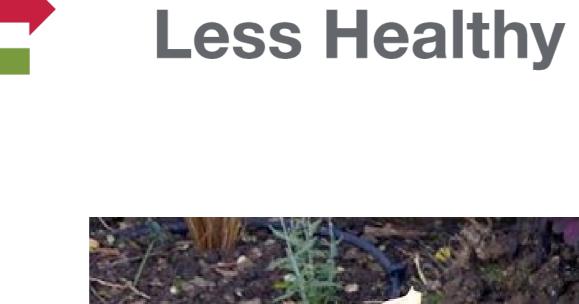


Synthesis/Integration

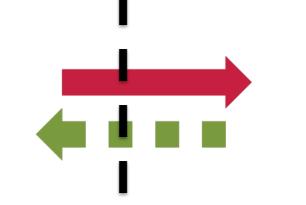


Advances research on the integration of complementary and conventional care and integrative approaches to physiology, pathophysiology, and treatment

NCCH)







Disease





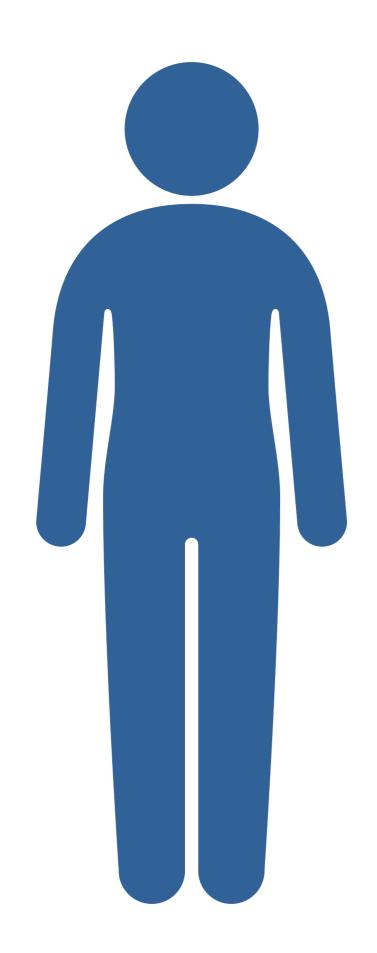




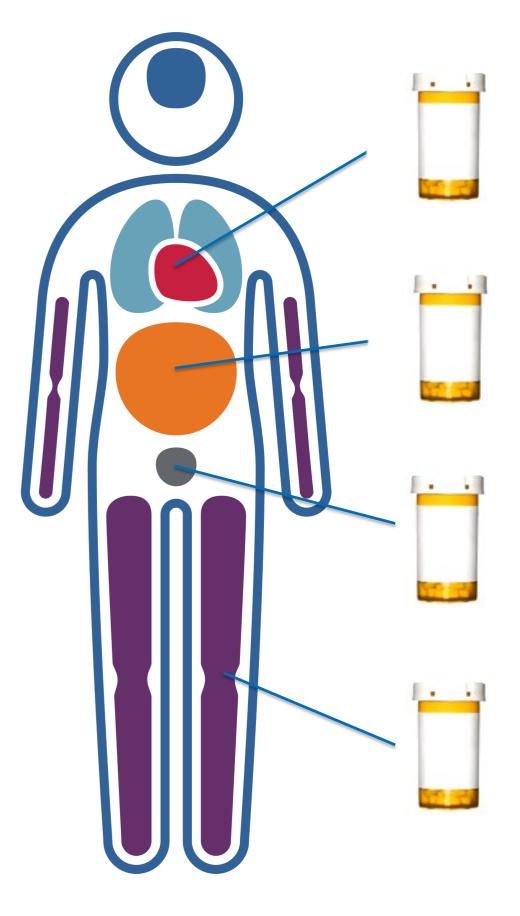
Less Healthy



Disease







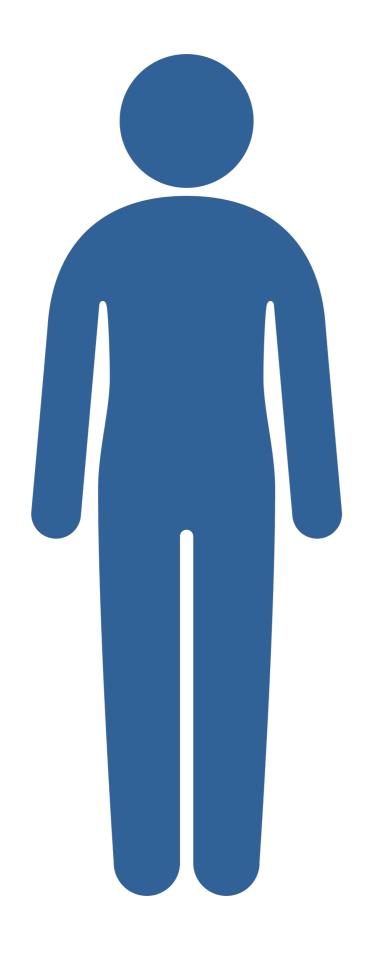




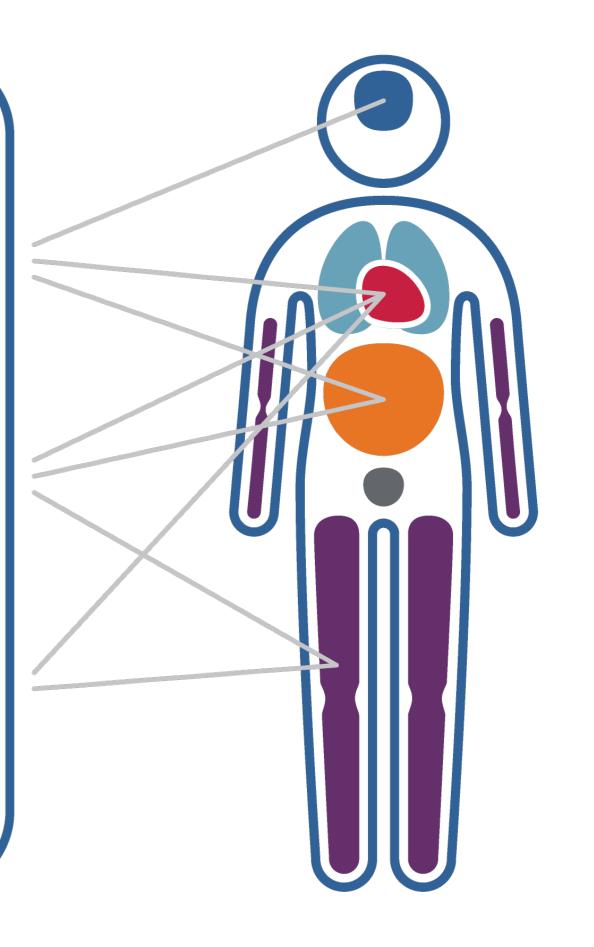
Less Healthy



Disease



Chronic stress Poor sleep Poor diet Sedentary lifestyle





Less Healthy



Disease



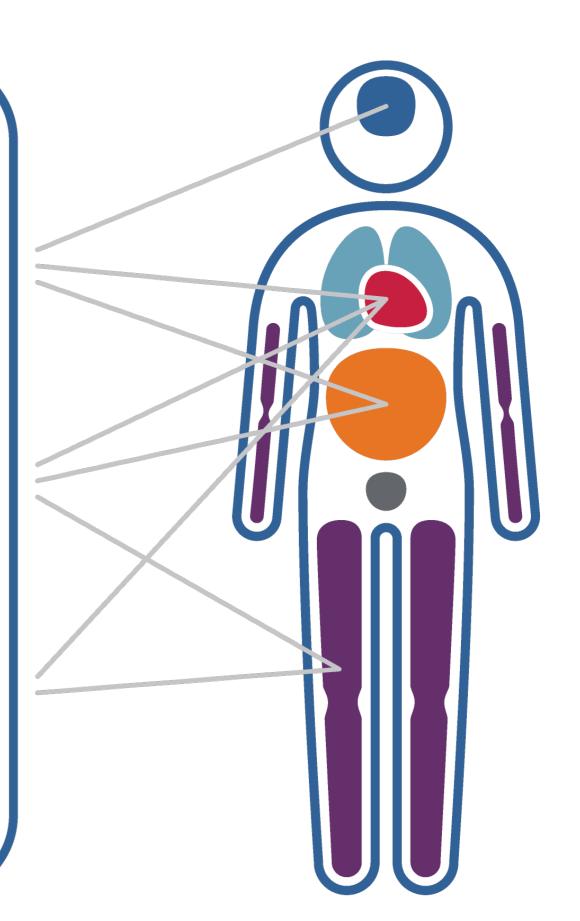
Self care

Psychological Nutritional Physical

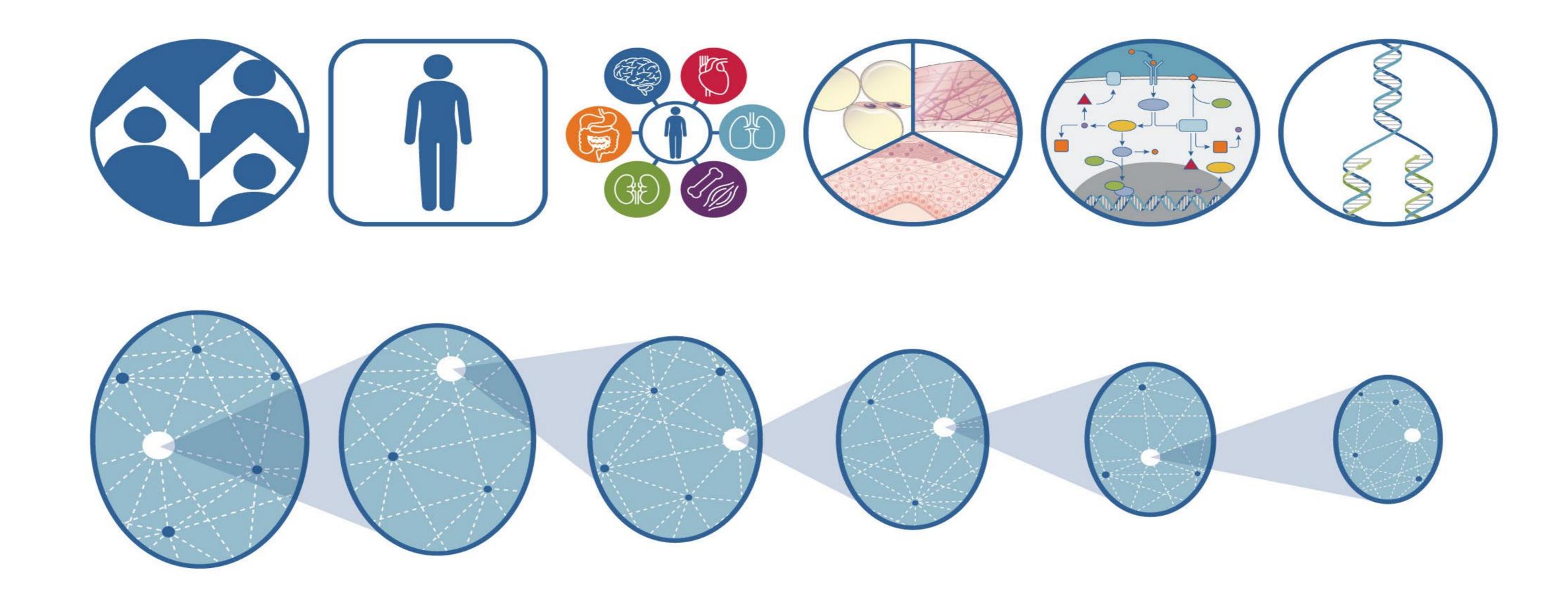
Multicomponent interventions **Chronic stress**

Poor diet

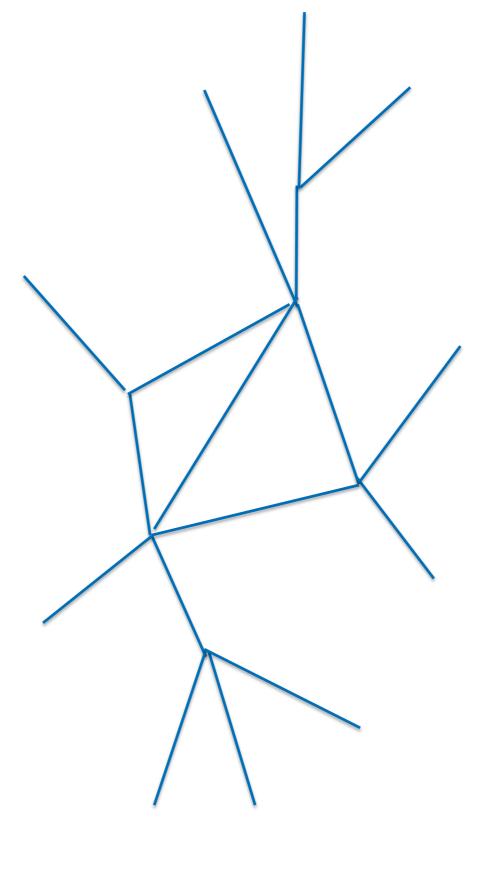
Sedentary lifestyle



Whole Person Health

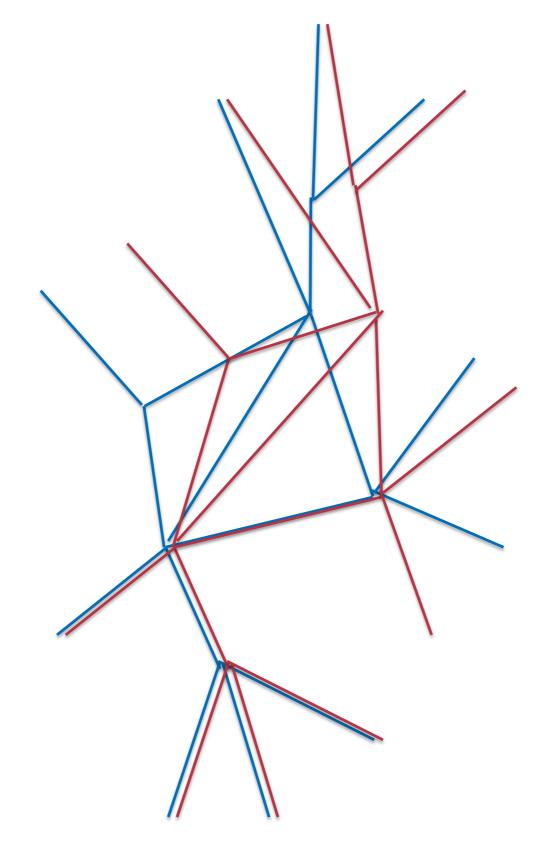






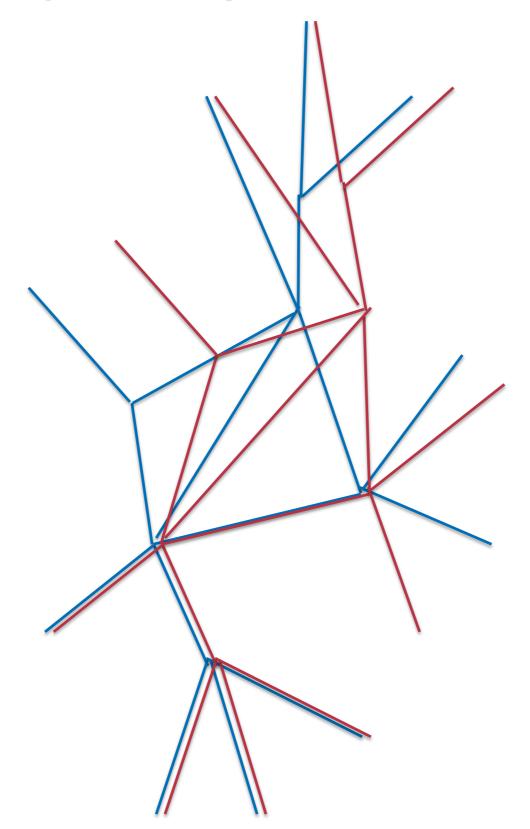
METABOLIC NETWORK

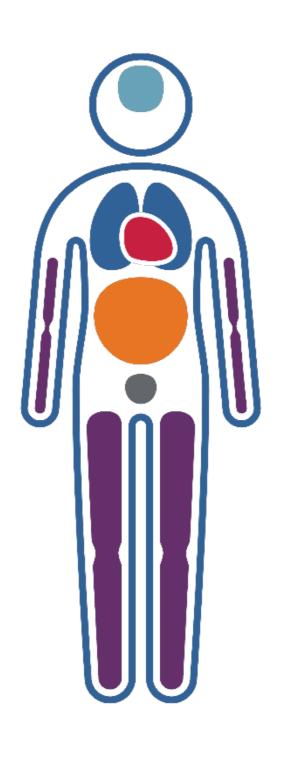




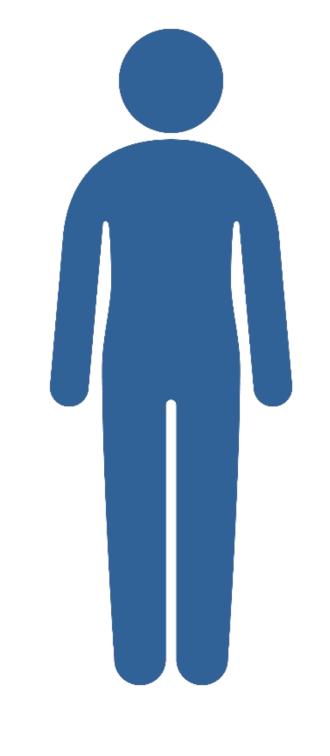


HEALTHIER STATE





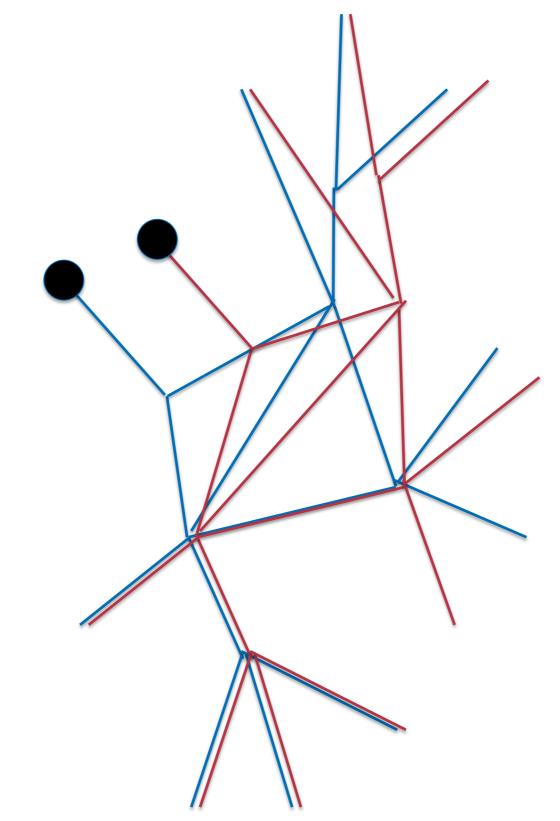
LESS HEALTHY STATE

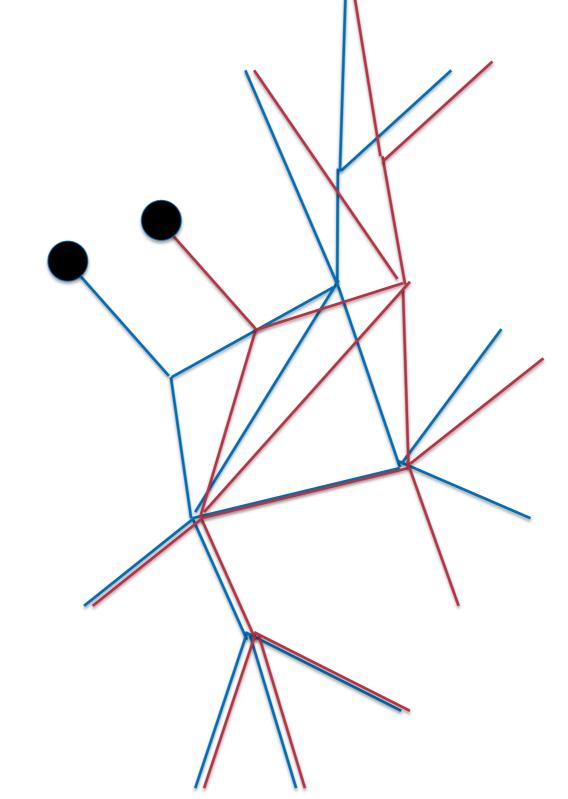


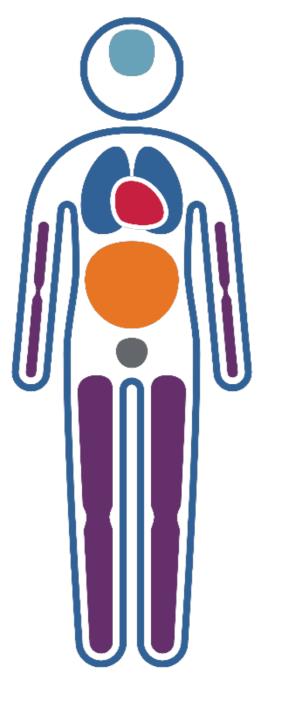
HEALTHIER STATE







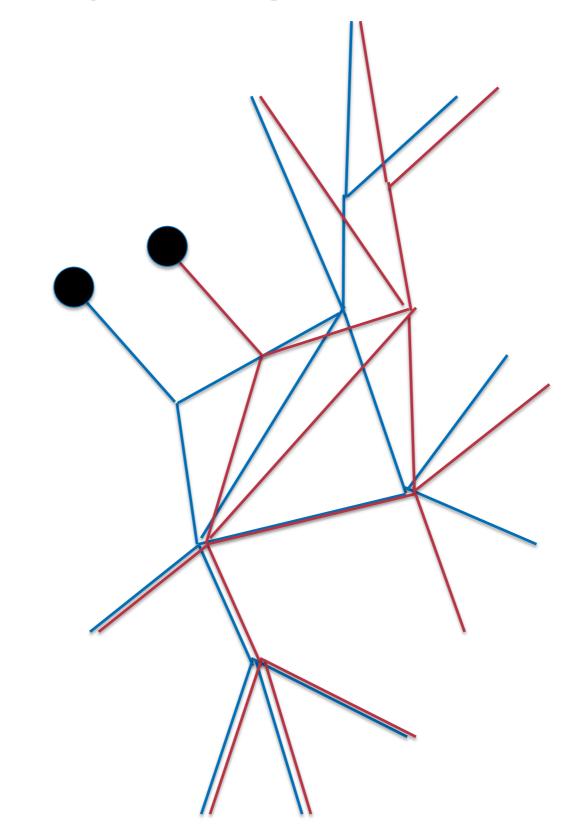


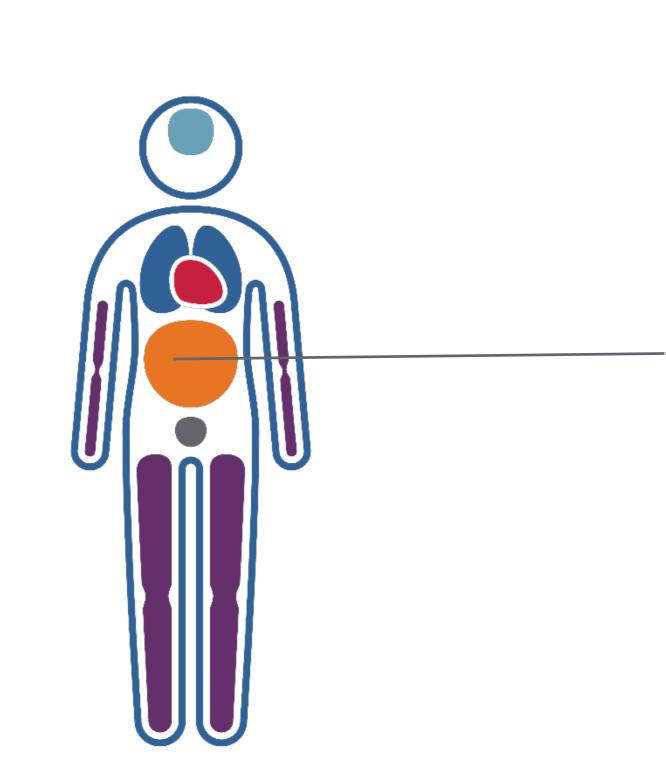


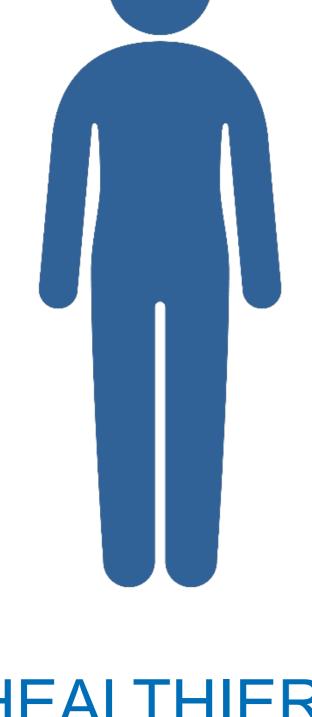






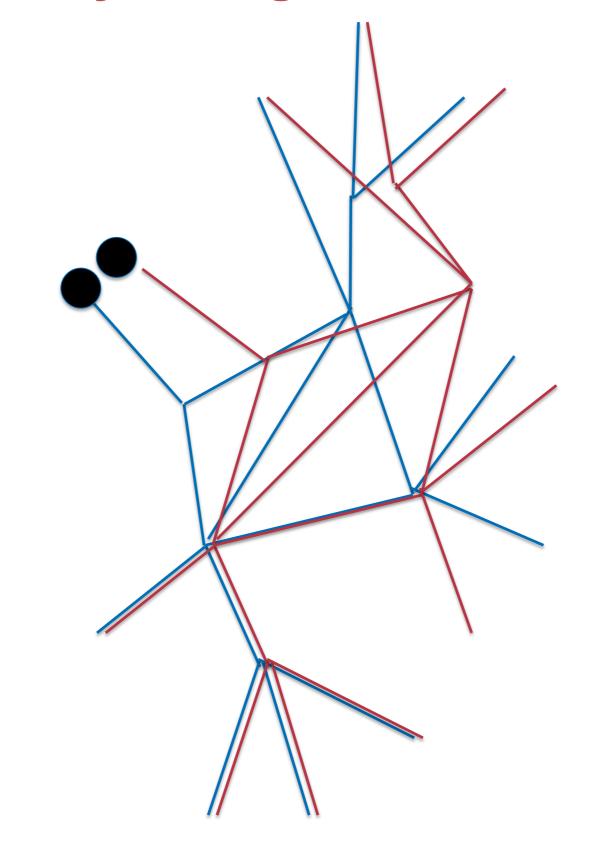


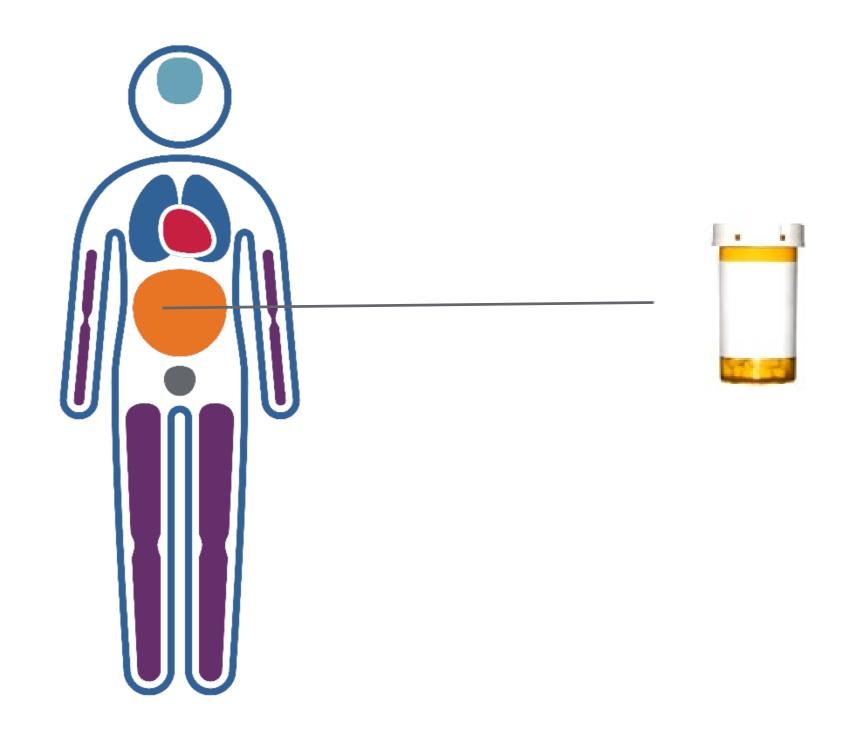


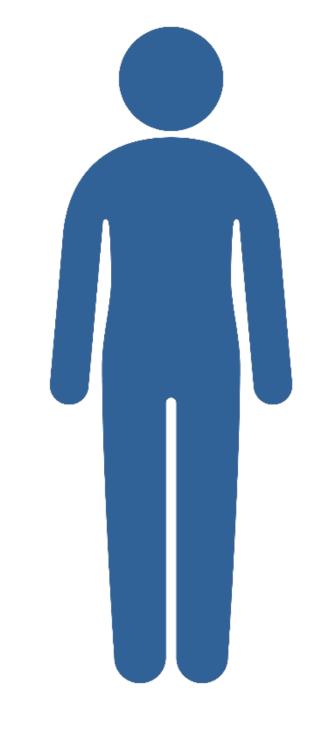






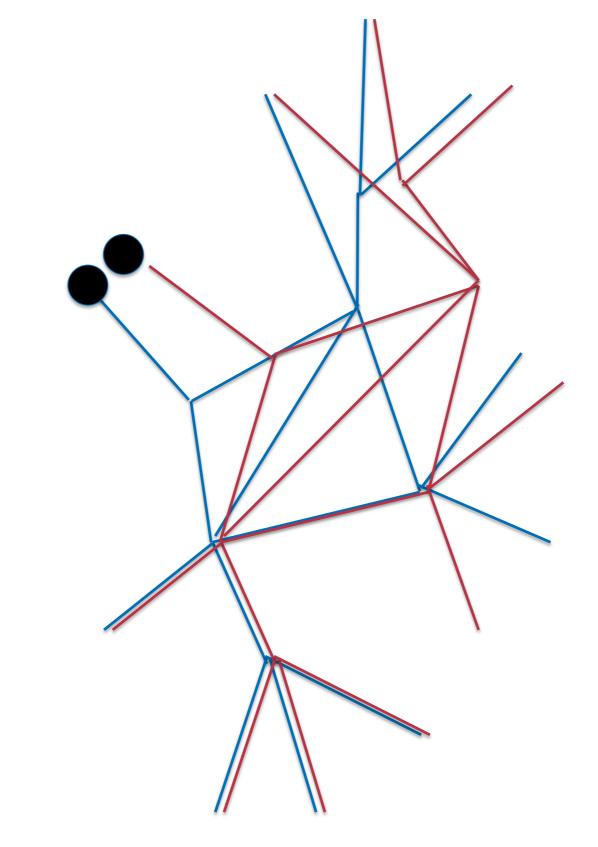


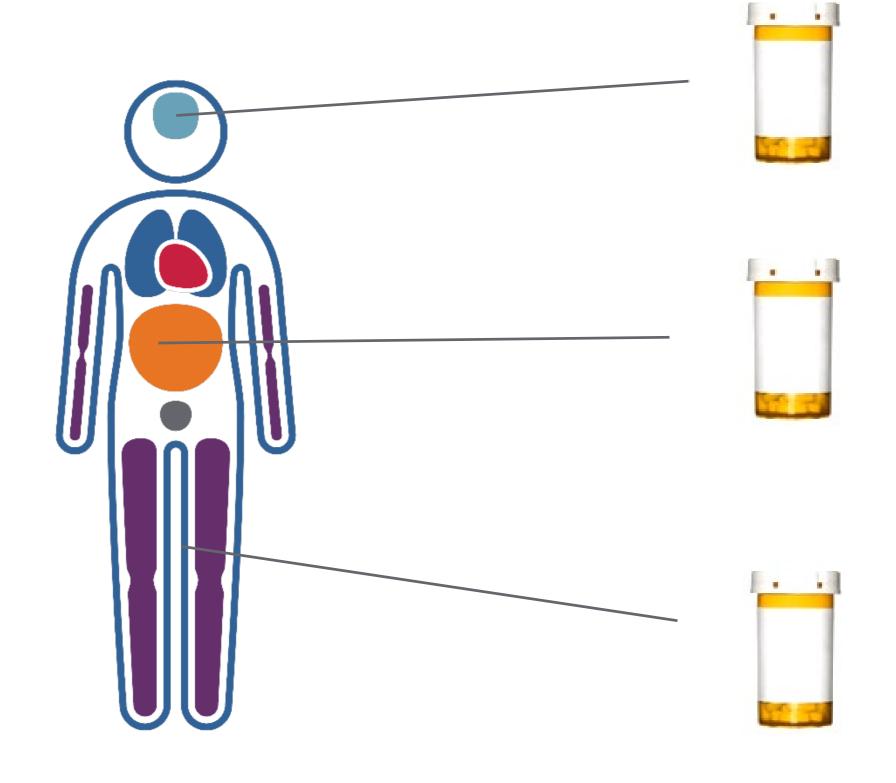






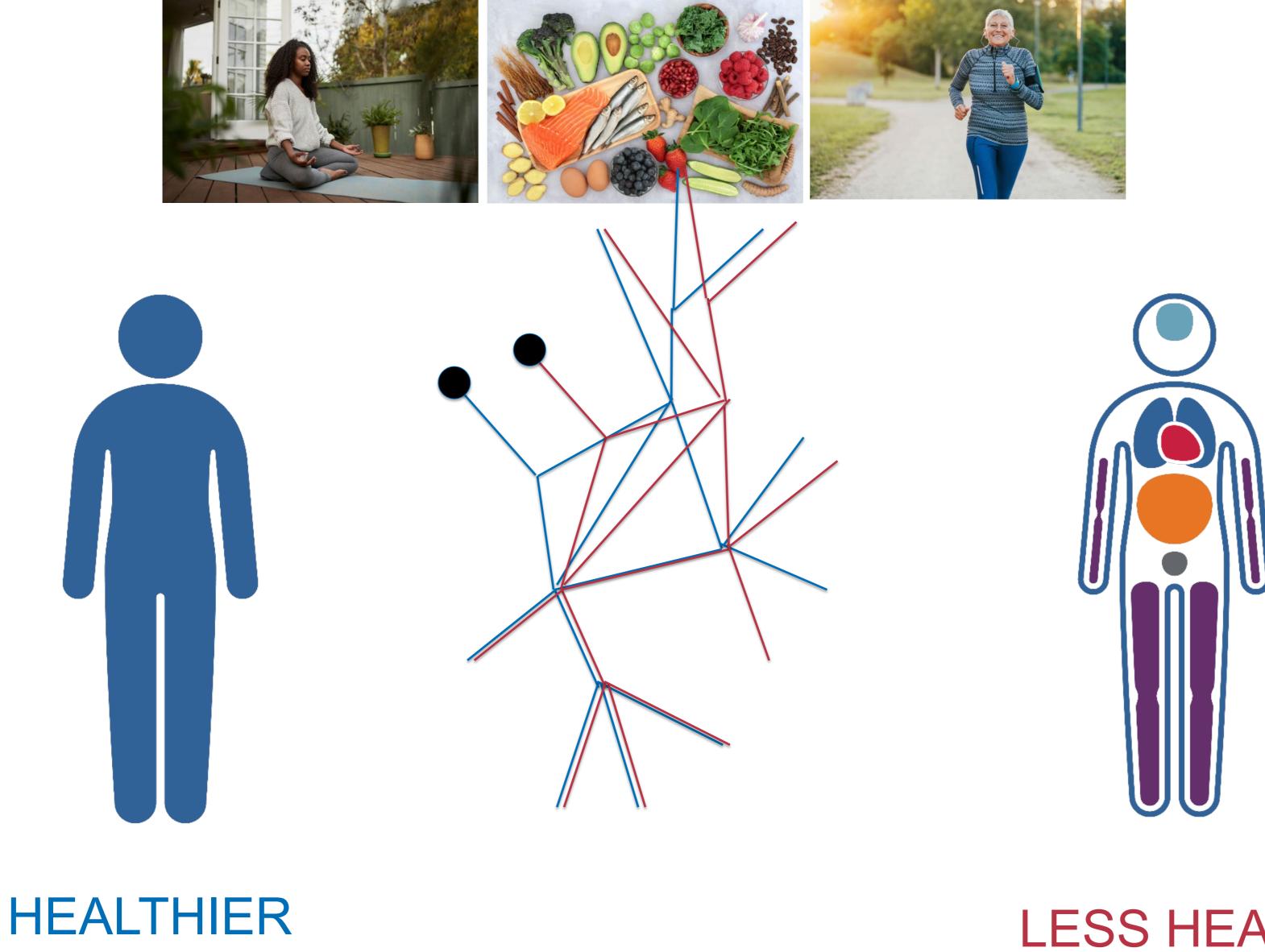






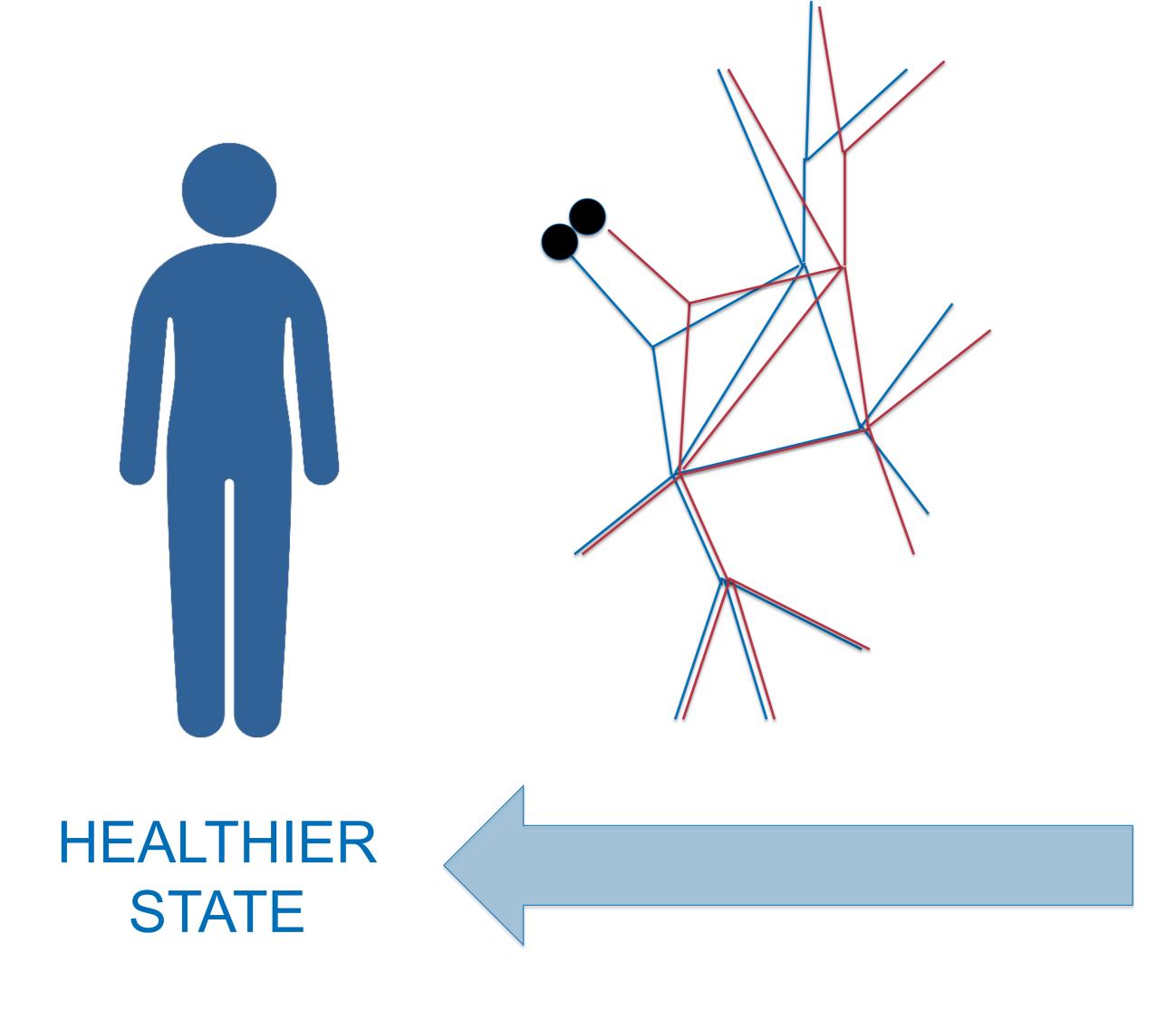


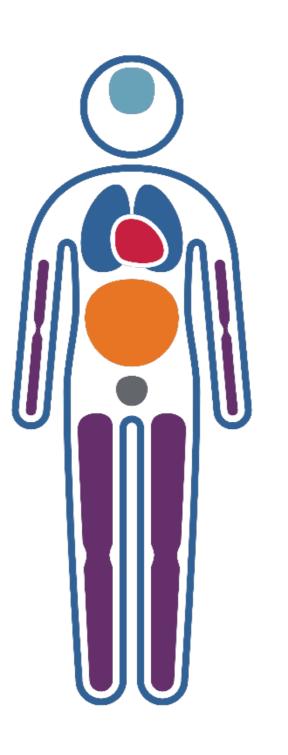


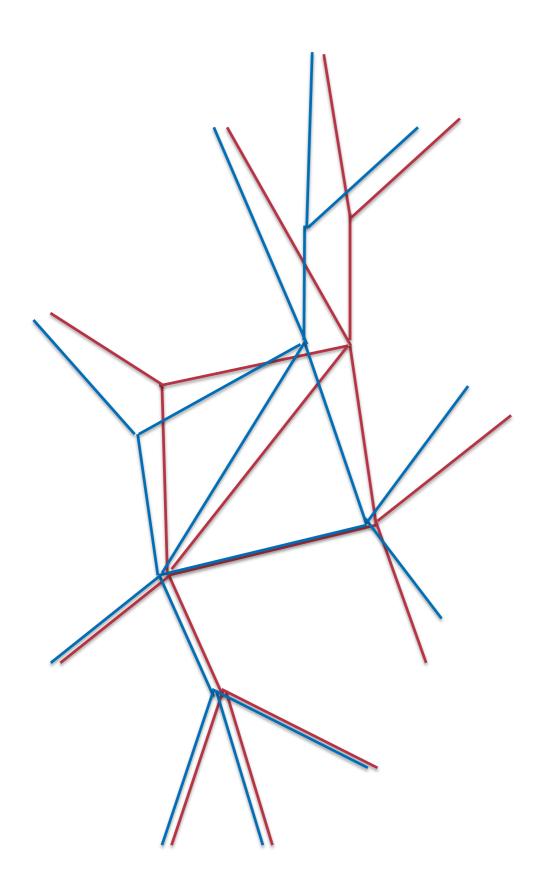


STATE

Self care Non-drug interventions

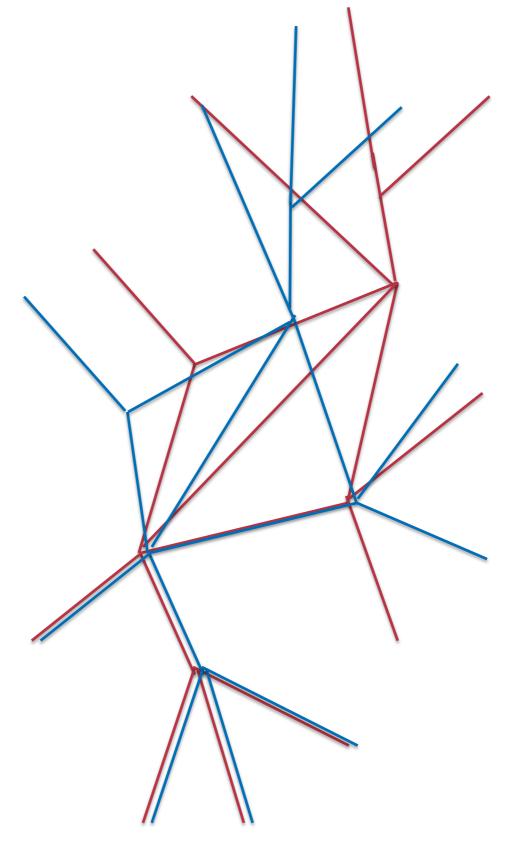


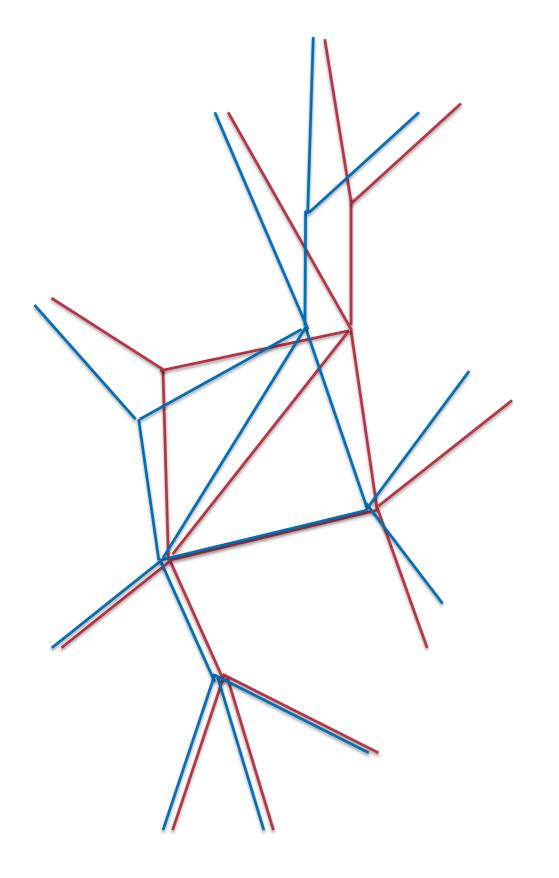




HEALTHIER STATE

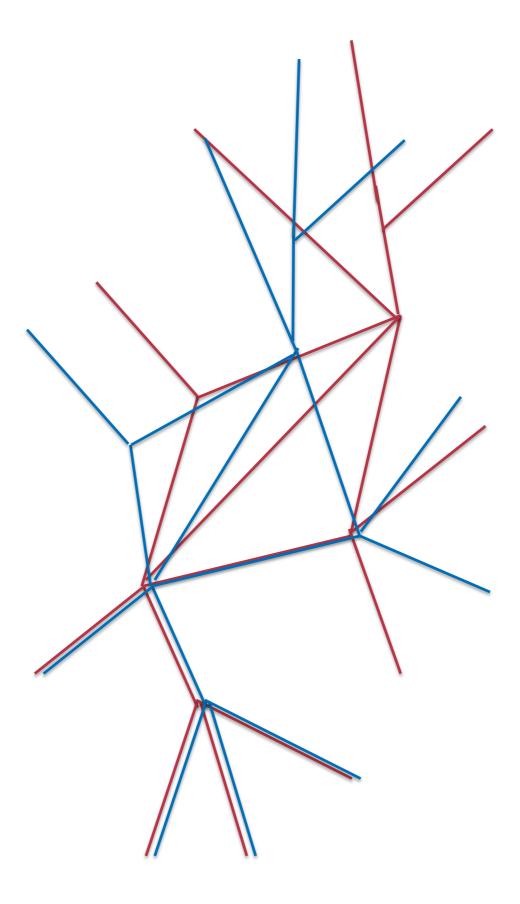
Pathogenesis





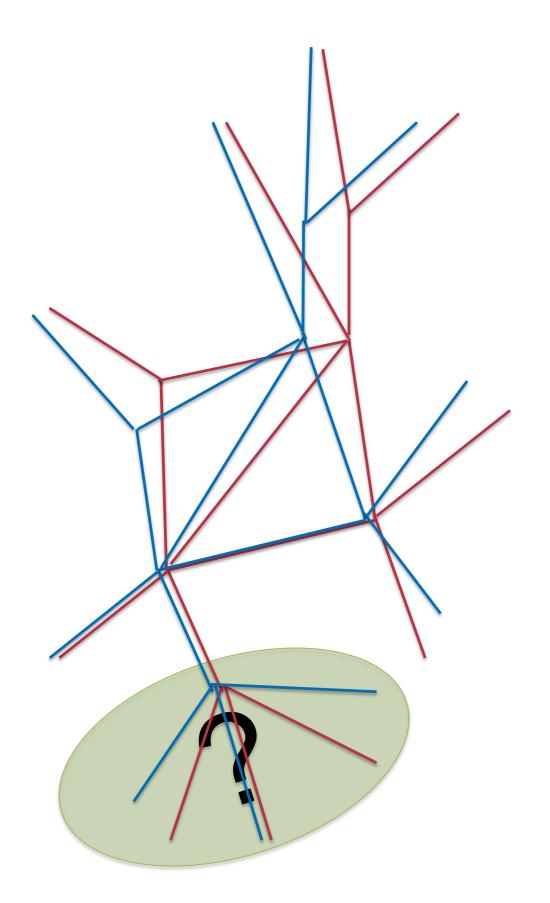
?

Salutogenesis



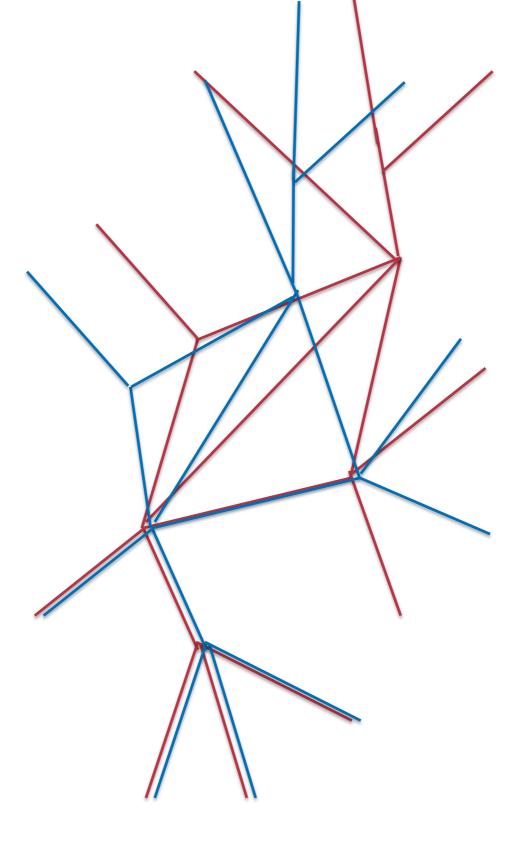
LESS HEALTHY STATE

HEALTHIER STATE



HEALTHIER STATE

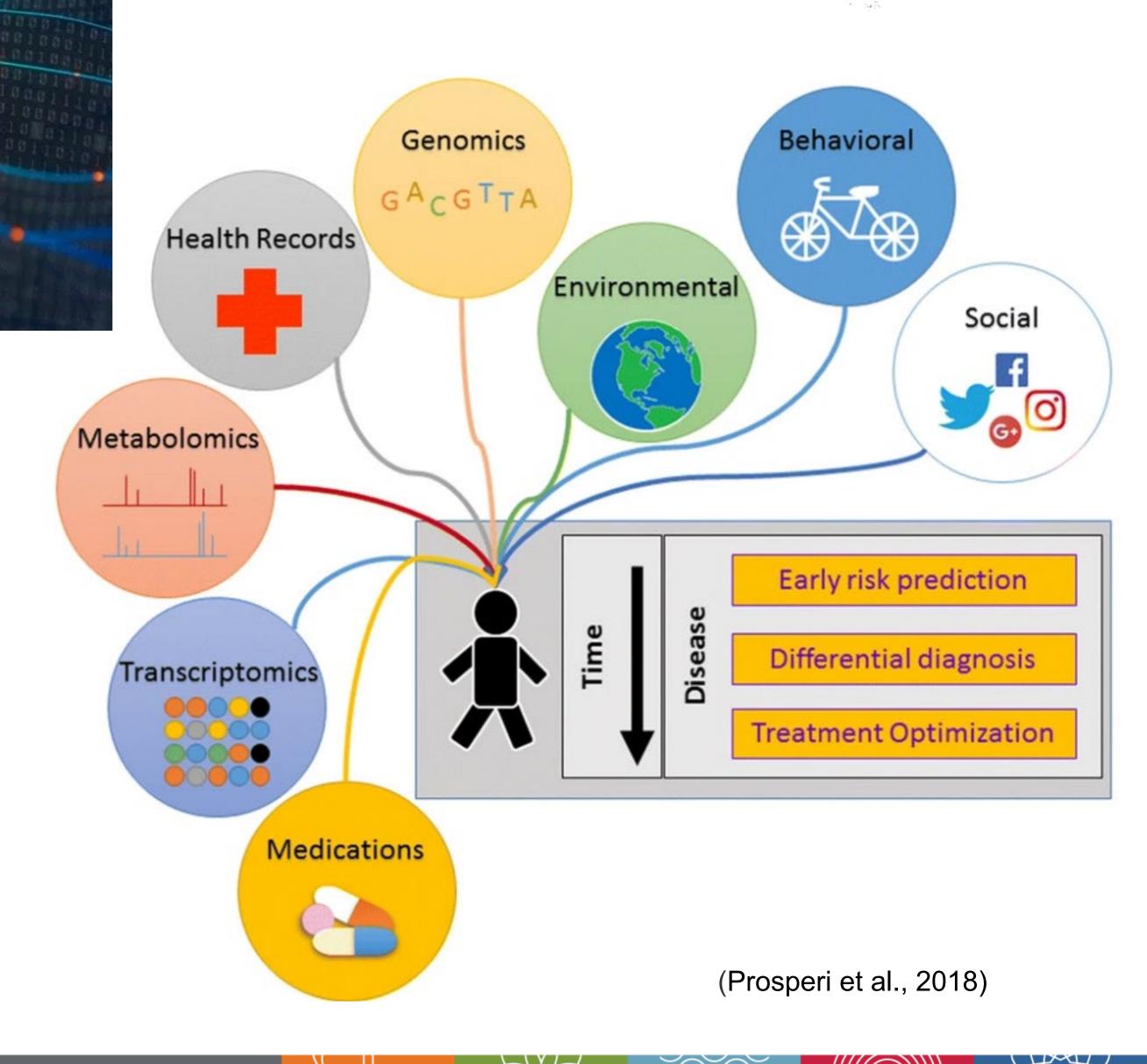
Salutogenesis







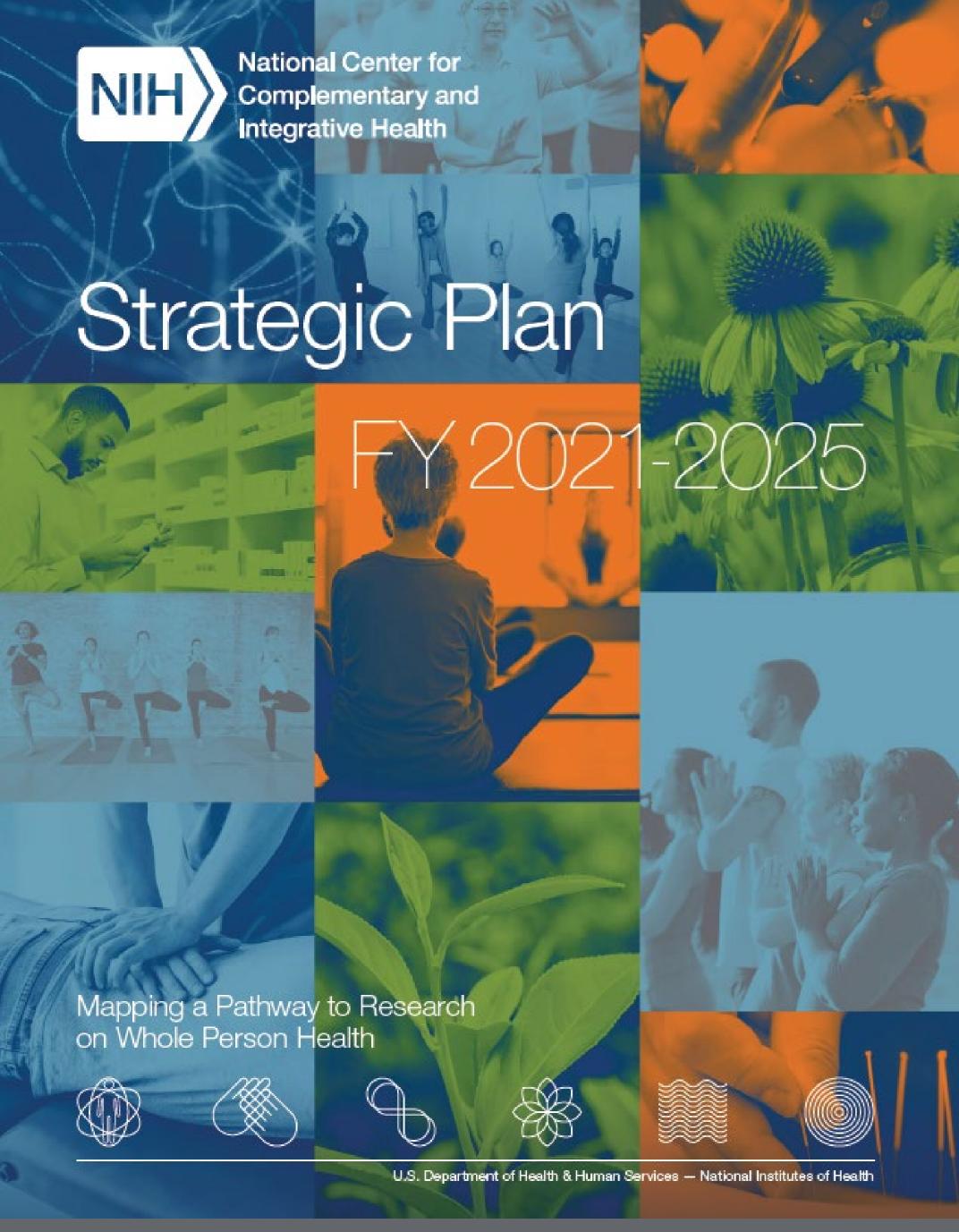
Grand Challenges Integrate all types of data to predict health outcomes

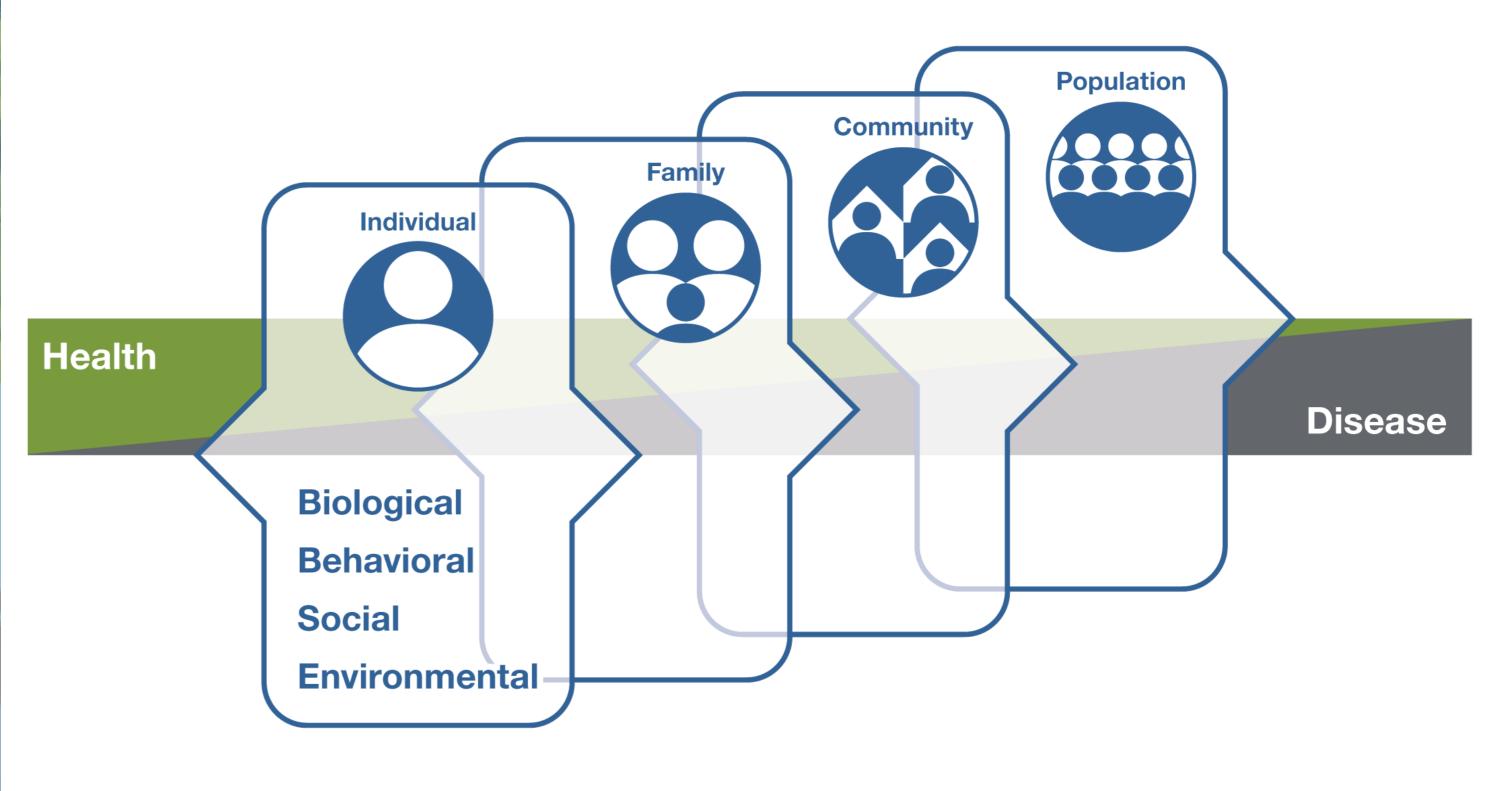


BRIDGE2AI

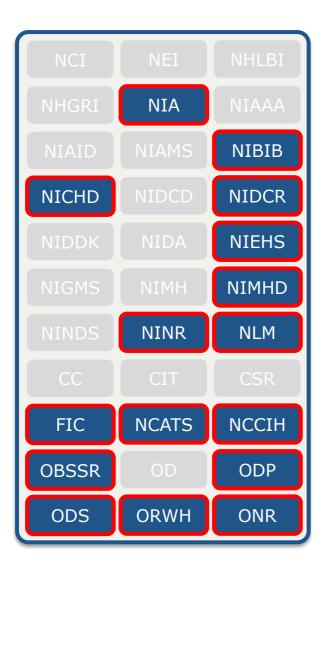
Addresses health promotion and restoration, resilience, disease prevention, and symptom management





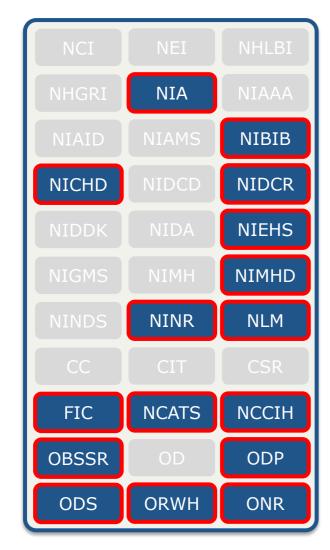




















STAKEHOLDERS PARTNERSHIPS

> **WHOLE PERSON HEALTH RESEARCH**







WholeHealth









A transformed healthcare system promoting integrative medicine and health for all.

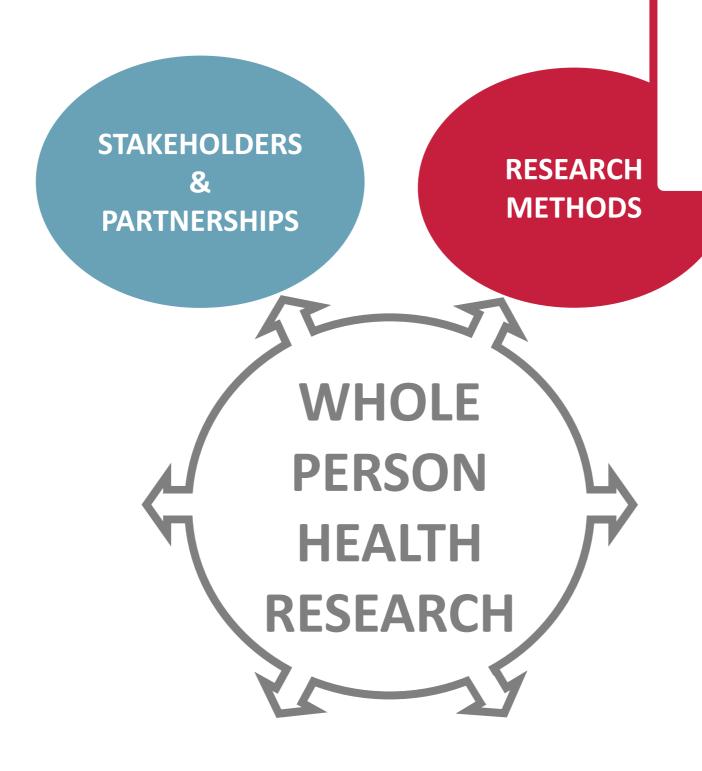


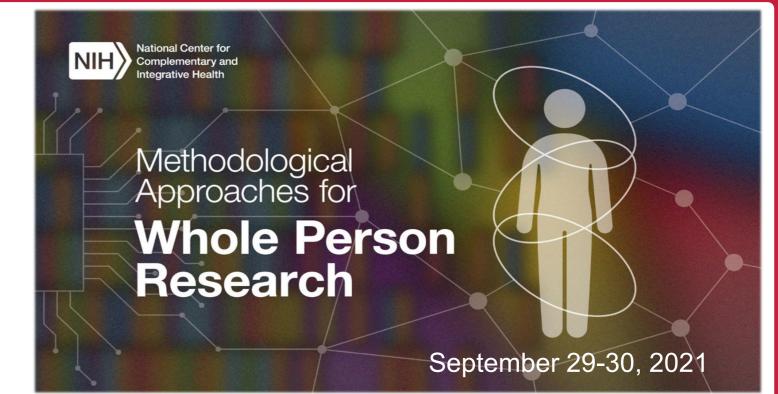
AMERICAN COLLEGE OF

Lifestyle Medicine

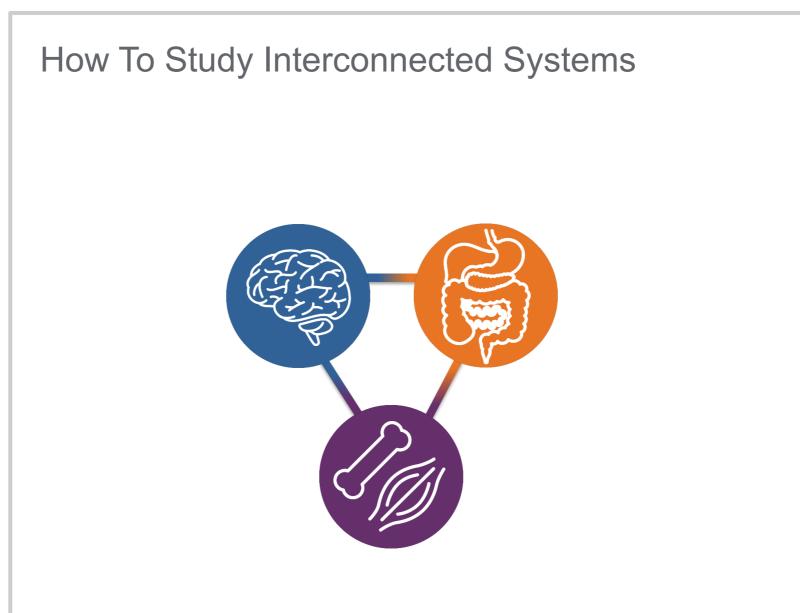


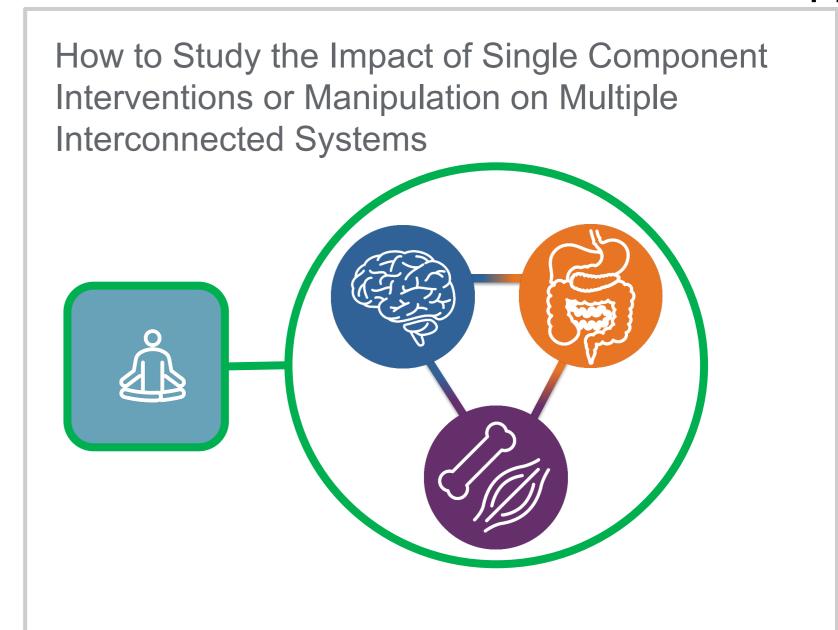








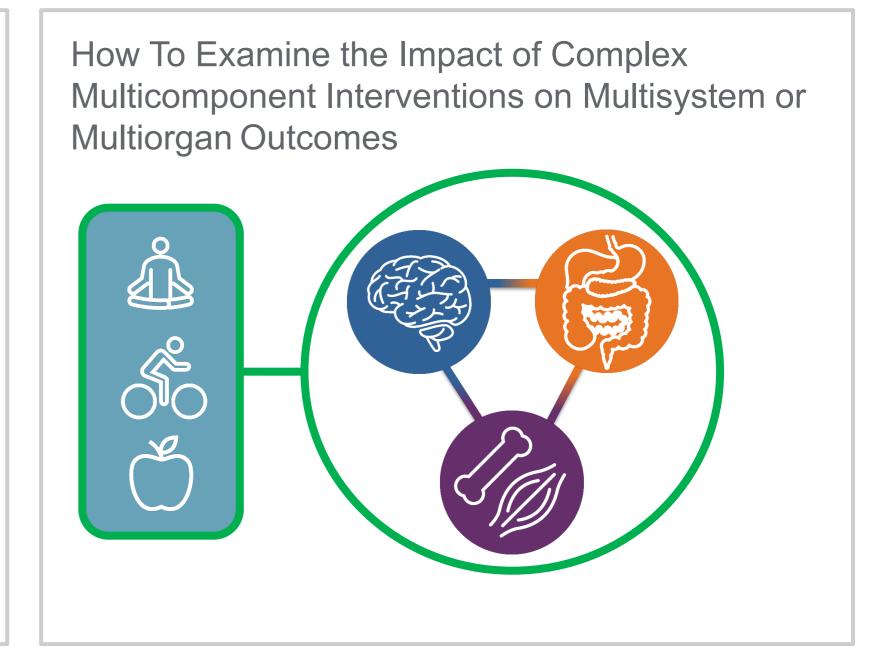




Potential Intervention Organs/System

Organs/System

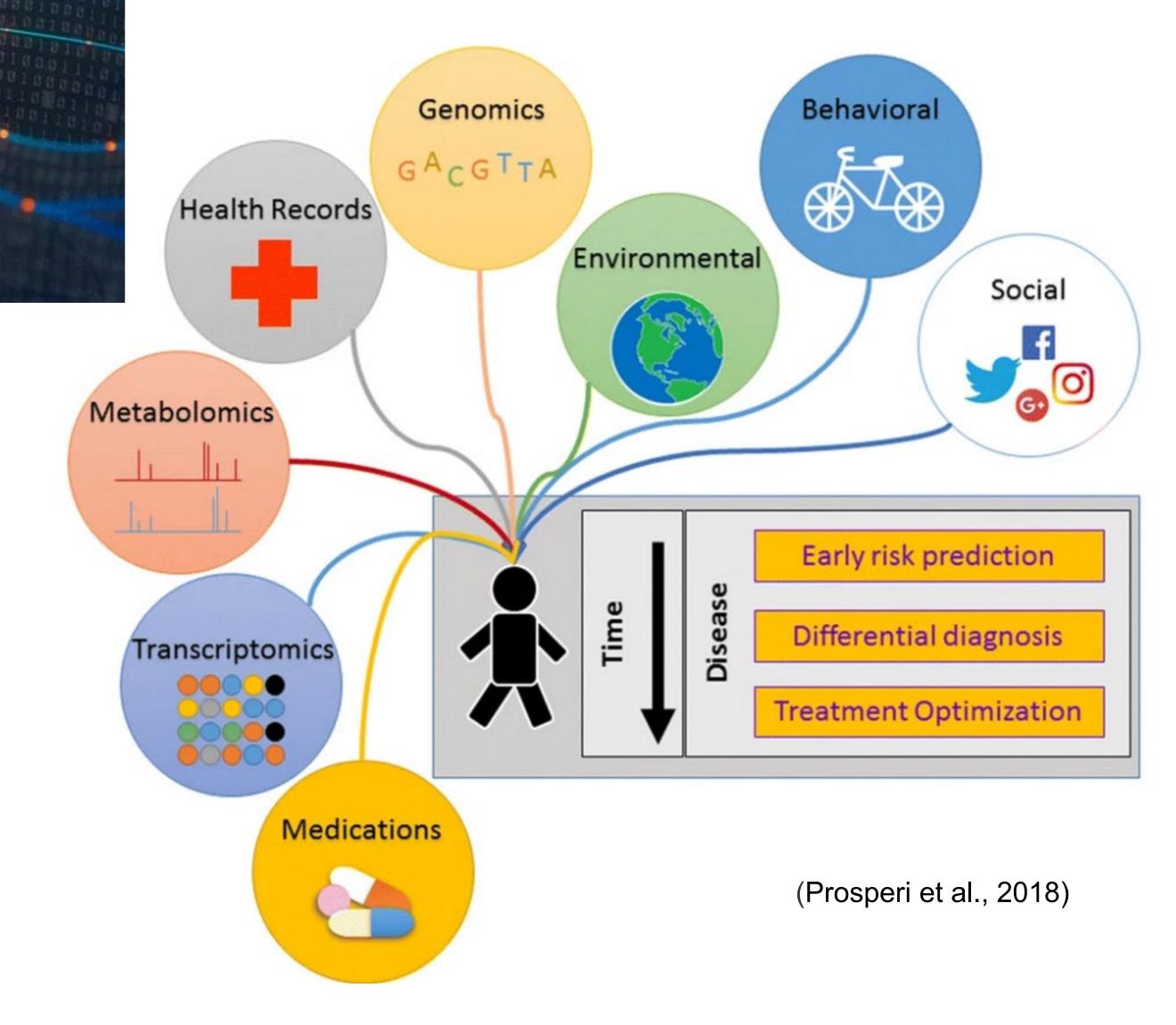
How To Investigate the Impact of Multicomponent Interventions or Therapeutic Systems on a Single Outcome

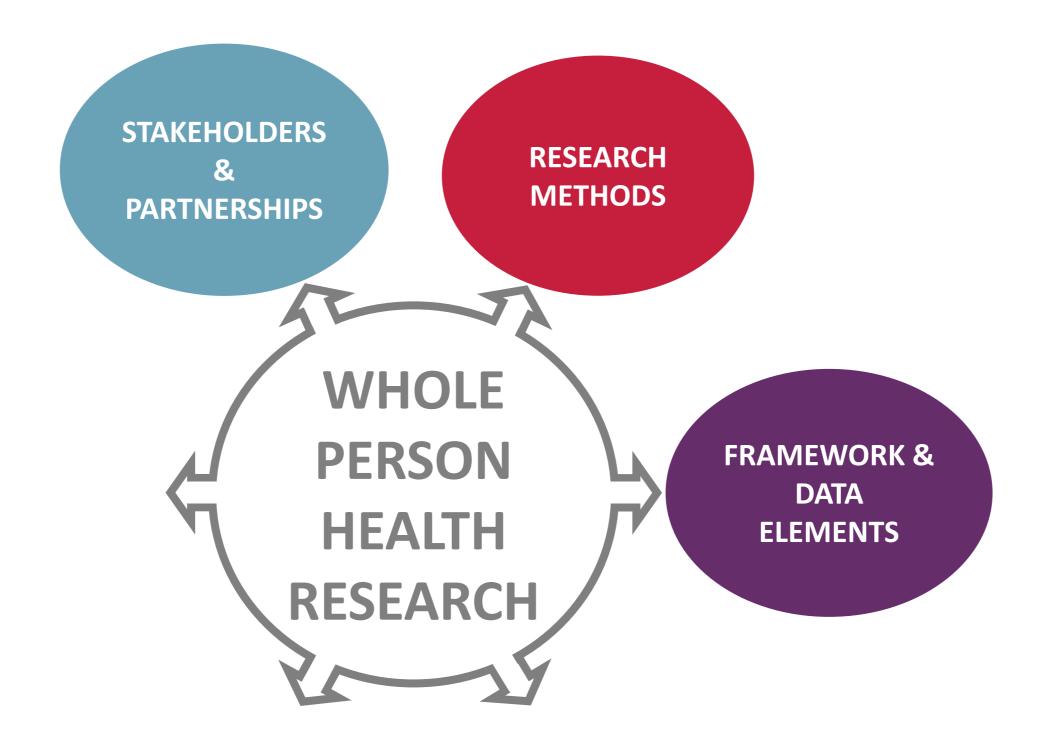


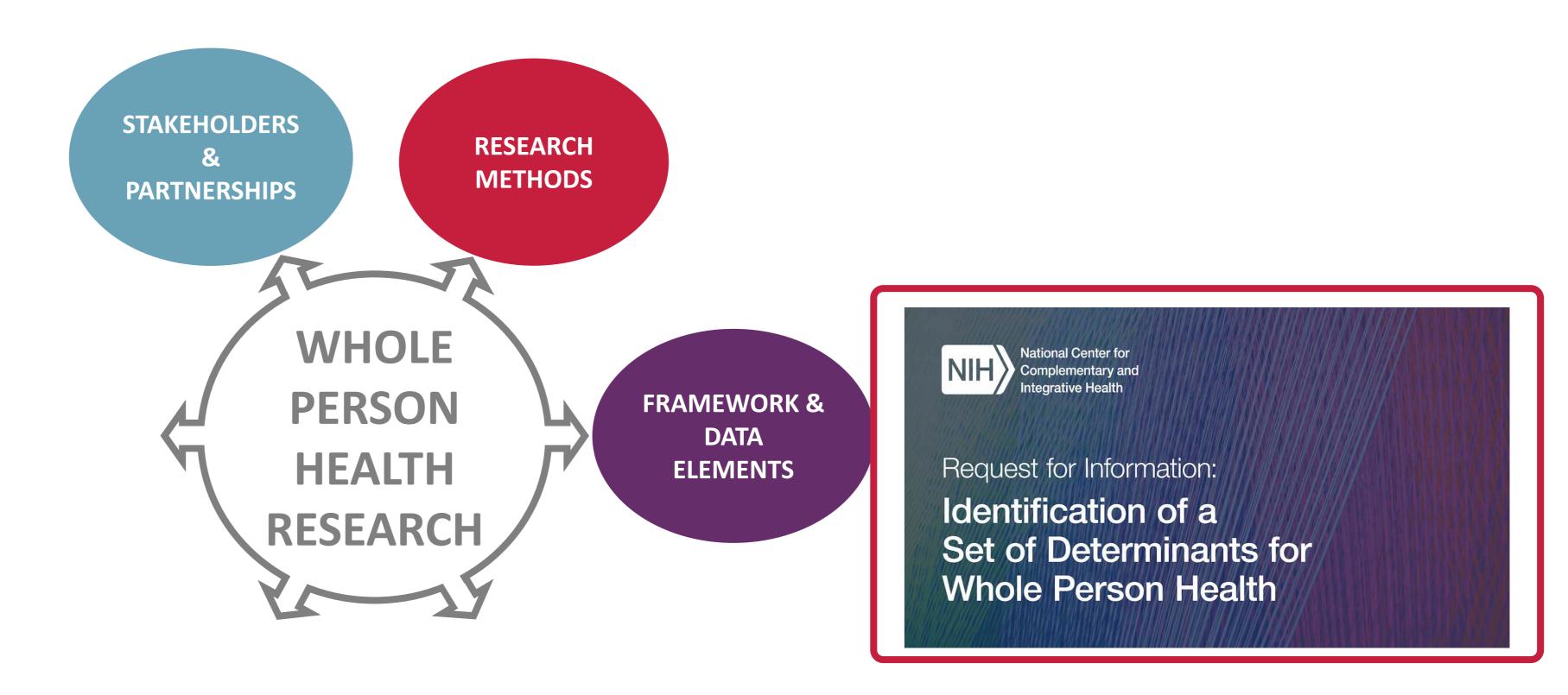




Grand Challenges
Integrate all types of
data to predict health
outcomes





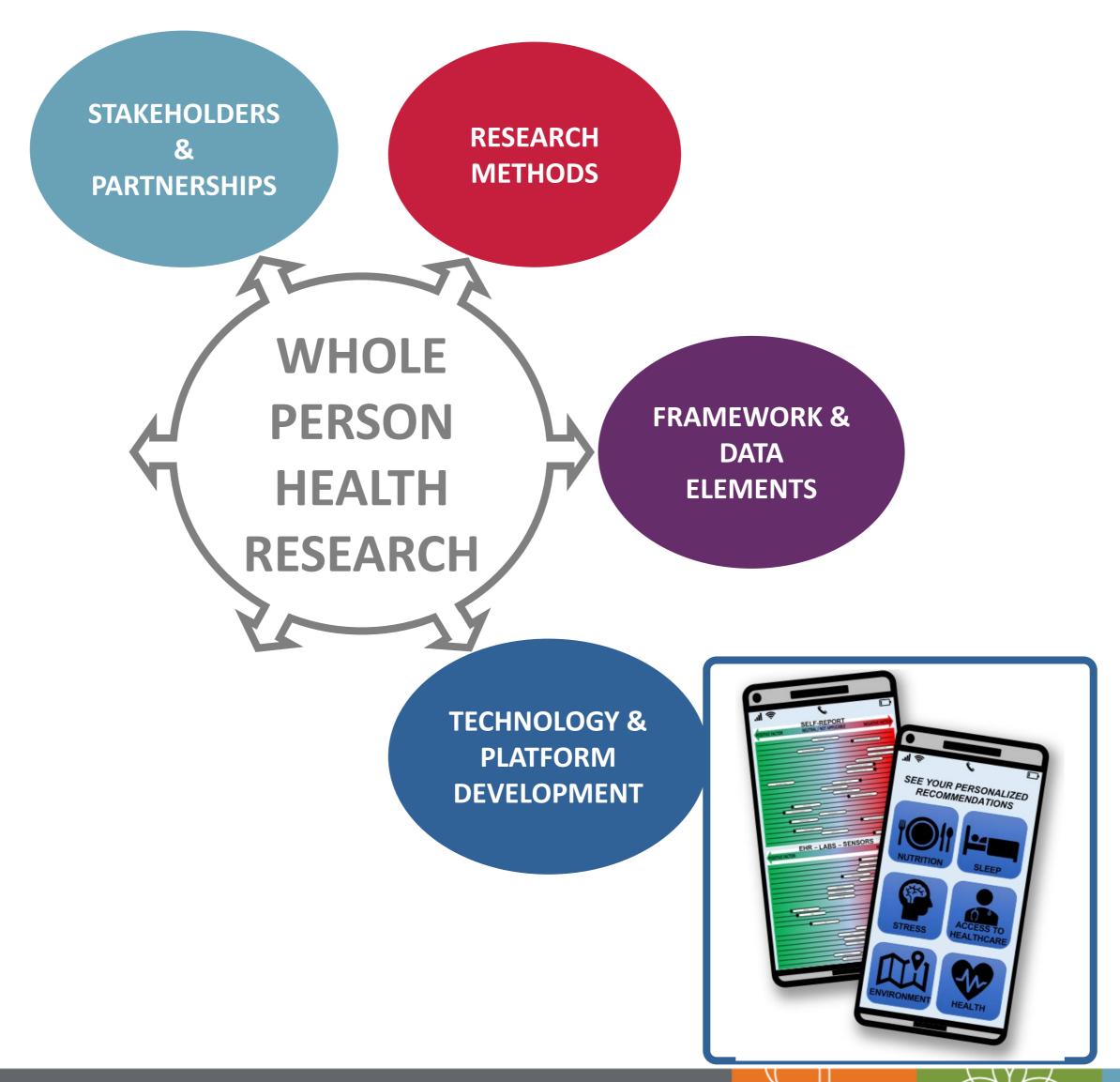


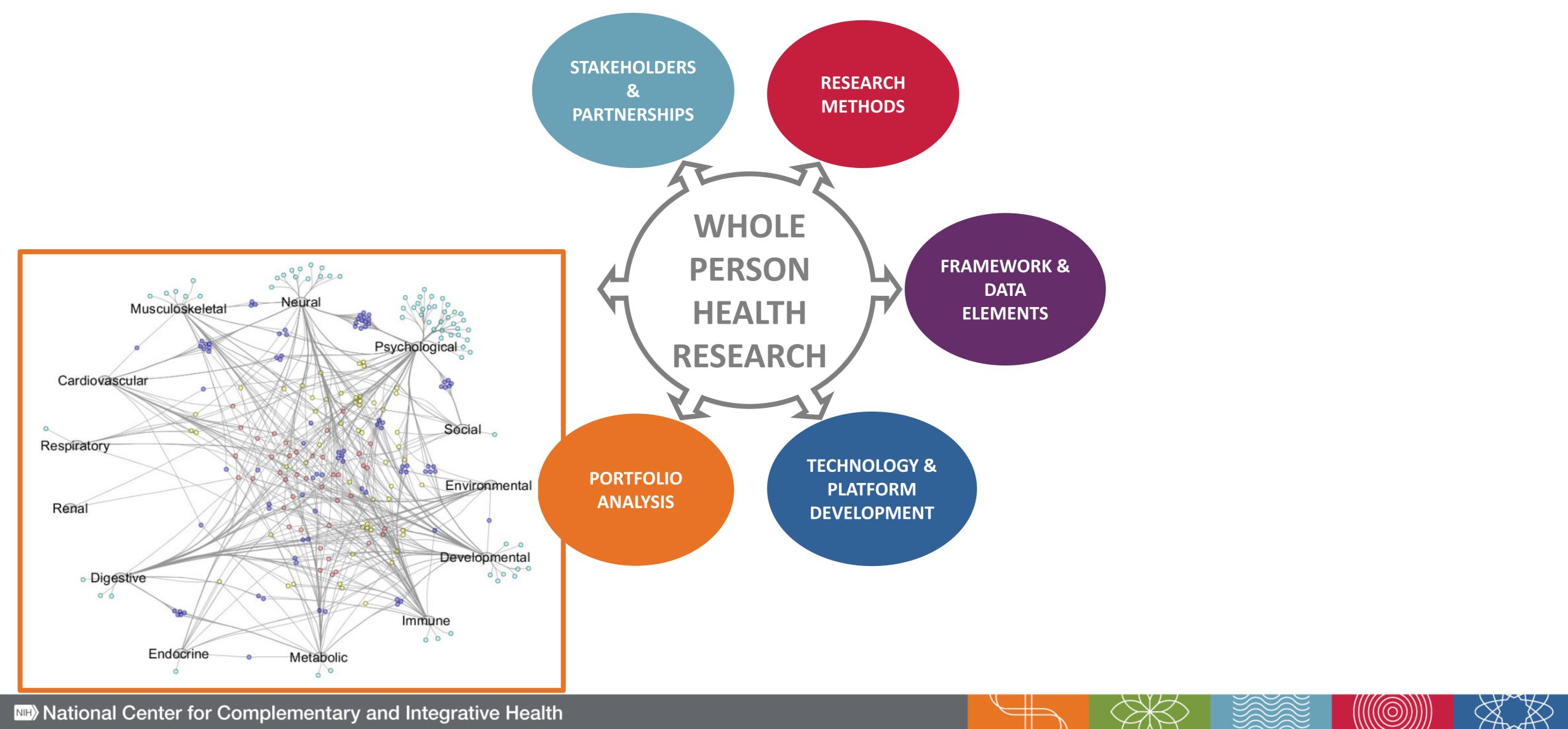
Purpose:

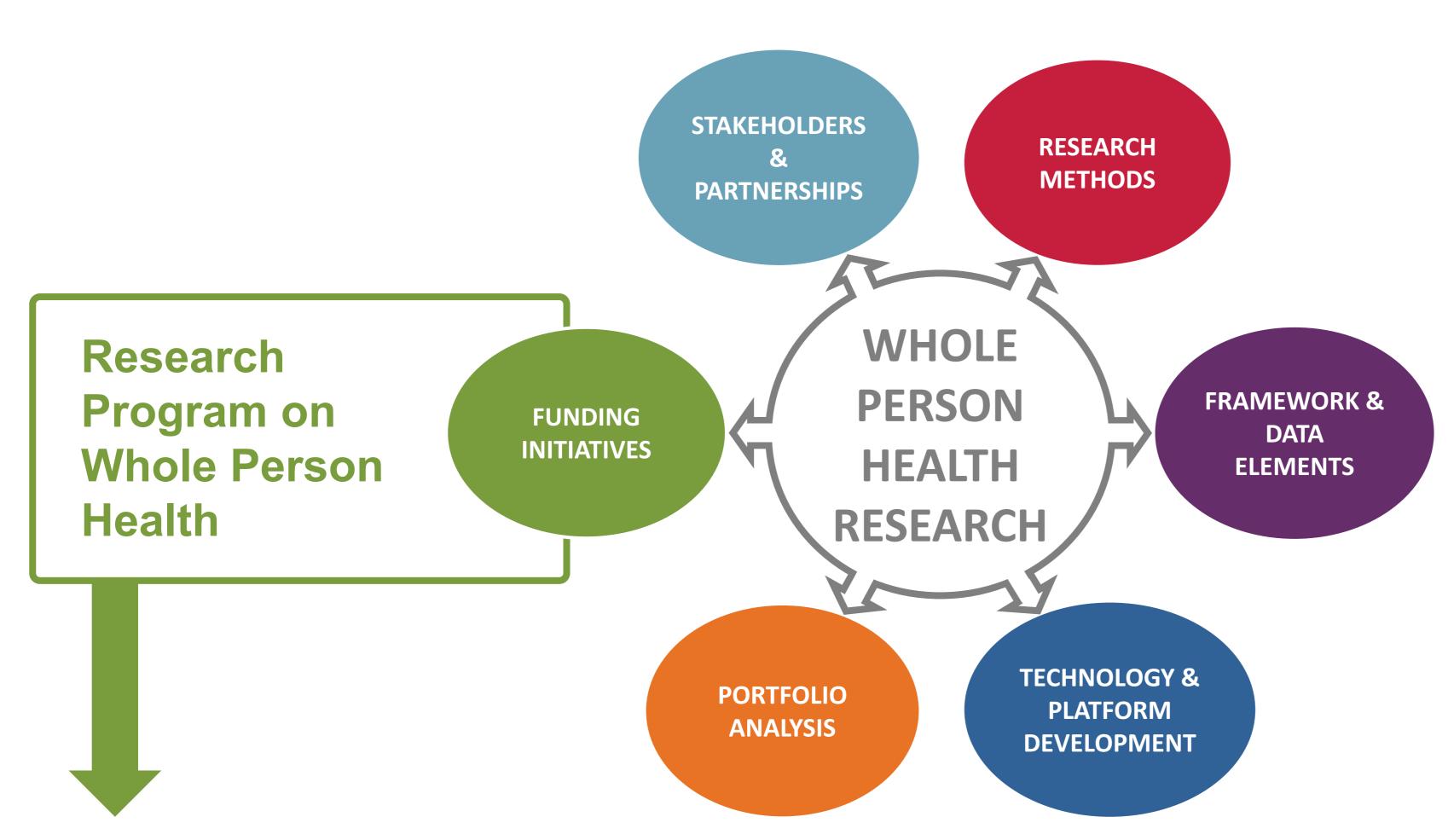
The purpose of this Request for Information (RFI) is to solicit public comment on defining a set of key determinants of health that addresses all the elements of the whole person health model, i.e., factors that can influence health either positively or negatively, and that encompass the full continuum of biological, behavioral, social, and environmental domains.





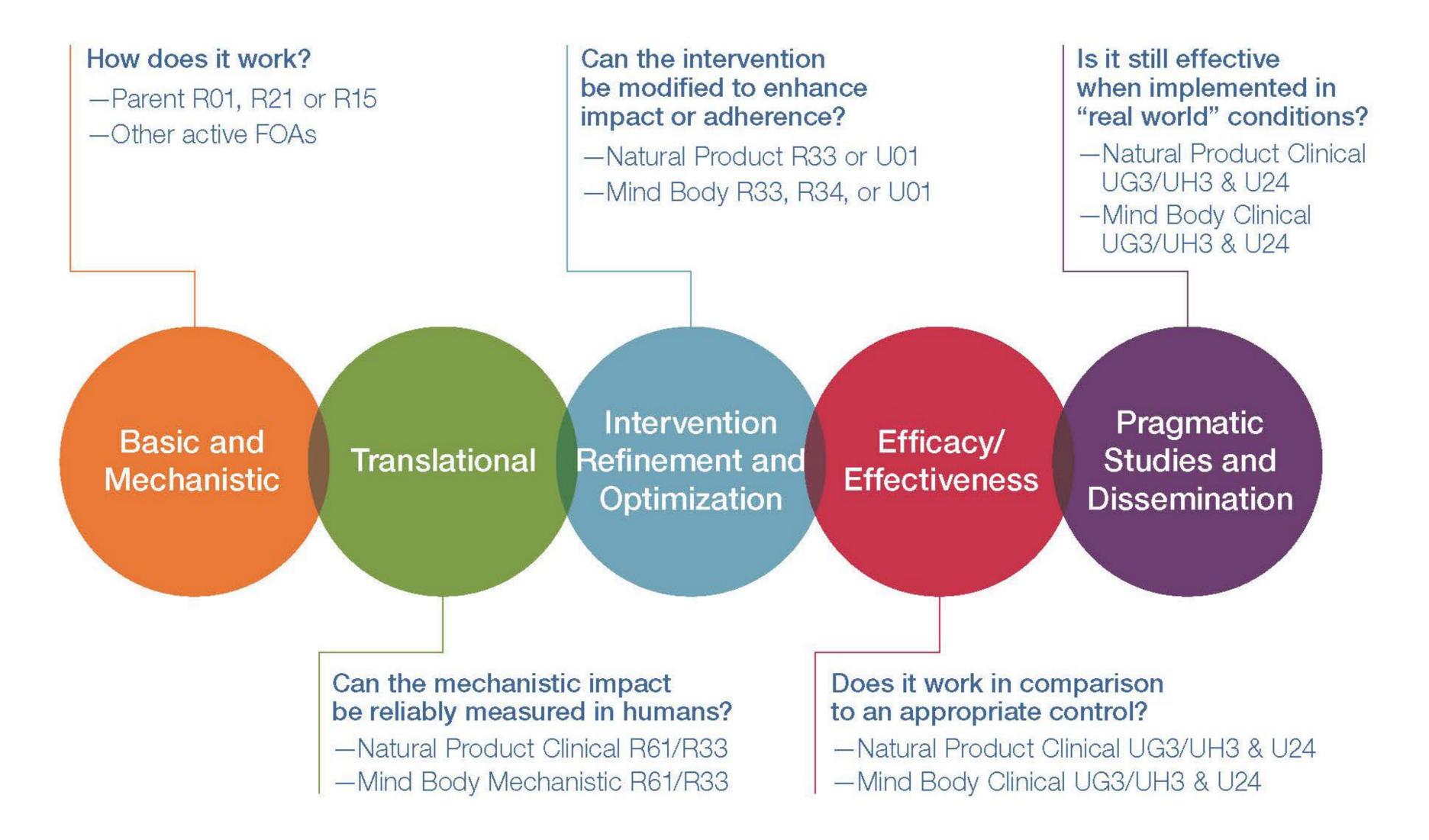






- 1. Exploring the fundamental science of interconnected systems
- 2. Investigating multicomponent interventions or therapeutic systems
- 3. Examining the impact of these interventions on multisystem or multiorgan outcomes.

Range of Research Questions

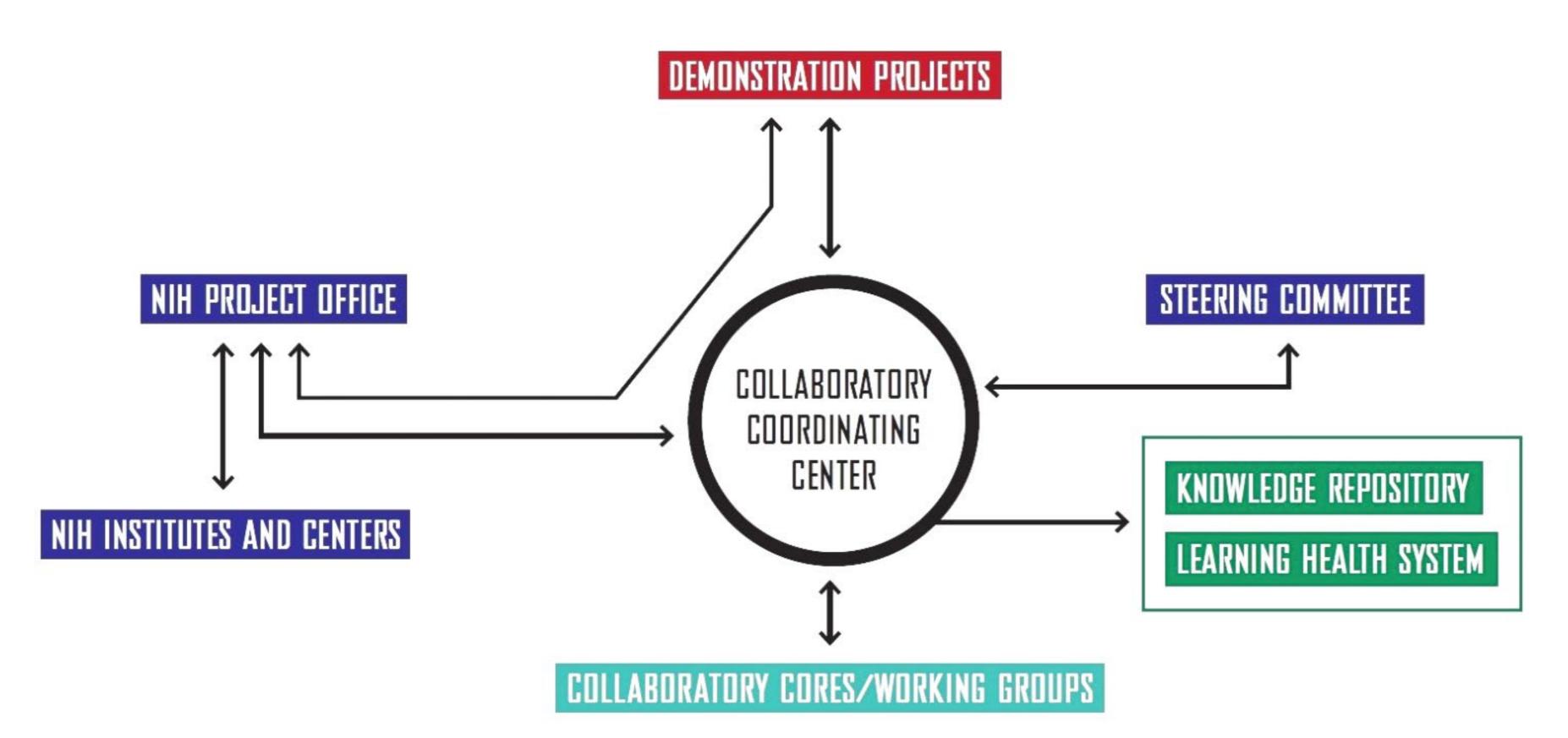




NIH PRAGMATIC TRIALS COLLABORATORY

Rethinking Clinical Trials®

10 YEARS! 2012 \$\Rightarrow\$2022



Implementation science trials study strategies for implementing evidence-based interventions into real-world health care delivery.



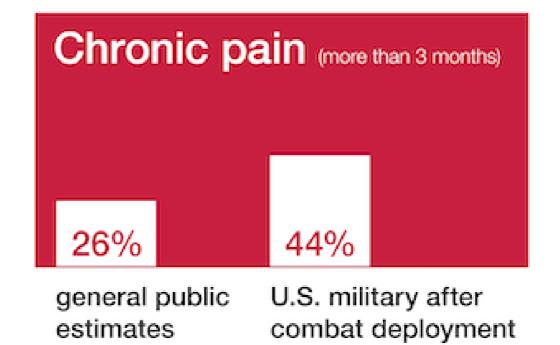
Supporting Research in Pain Management for Veterans and Military Service Members

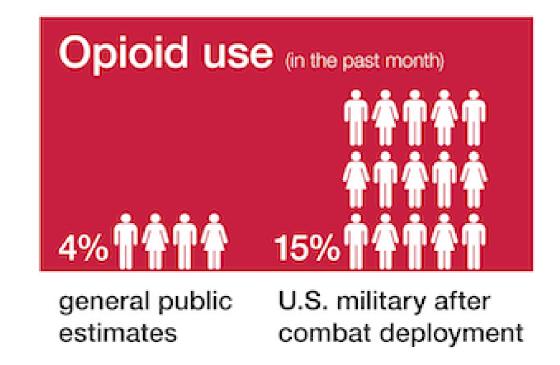
National Institutes of Health National Center for Complementary and Integrative Health

Fighting pain in the U.S. military, veterans, and their families



Thirteen new research studies will address pain and related conditions with nondrug approaches.*





These rates show an unmet need for managing chronic pain with nondrug approaches among U.S. military personnel and veterans.

Jonas WB, Schoomaker EB. Pain and opioids in the military: we must do better. JAMA Internal Medicine. 2014;174(8):1402-1403.



nccih.nih.gov/health/military-veteran

^{*}Funding provided by the National Institutes of Health's National Center for Complementary and Integrative Health and National Institute on Drug Abuse and the U.S. Department of Veterans Affairs.



Supporting Research in Pain Management for Veterans and Military Service Members

The Pain Management Collaboratory (PMC)

Closing the Gap between Science and Clinical Practice for Pain Management

The Pain Management Collaboratory is comprised of 11 pragmatic clinical trials that are studying nonpharmacological approaches for the management of pain and common co-occurring conditions in Military and Veterans healthcare systems and are supported by a central Coordinating Center (PMC³).

The lead funding organizations of the PMC and PMC³ include the National Institutes of Health (NIH) (led by the National Center for Complementary and Integrative Health (NCCIH), plus 7 additional offices) the Department of Defense (DOD), and the Department of Veterans Affairs (VA).

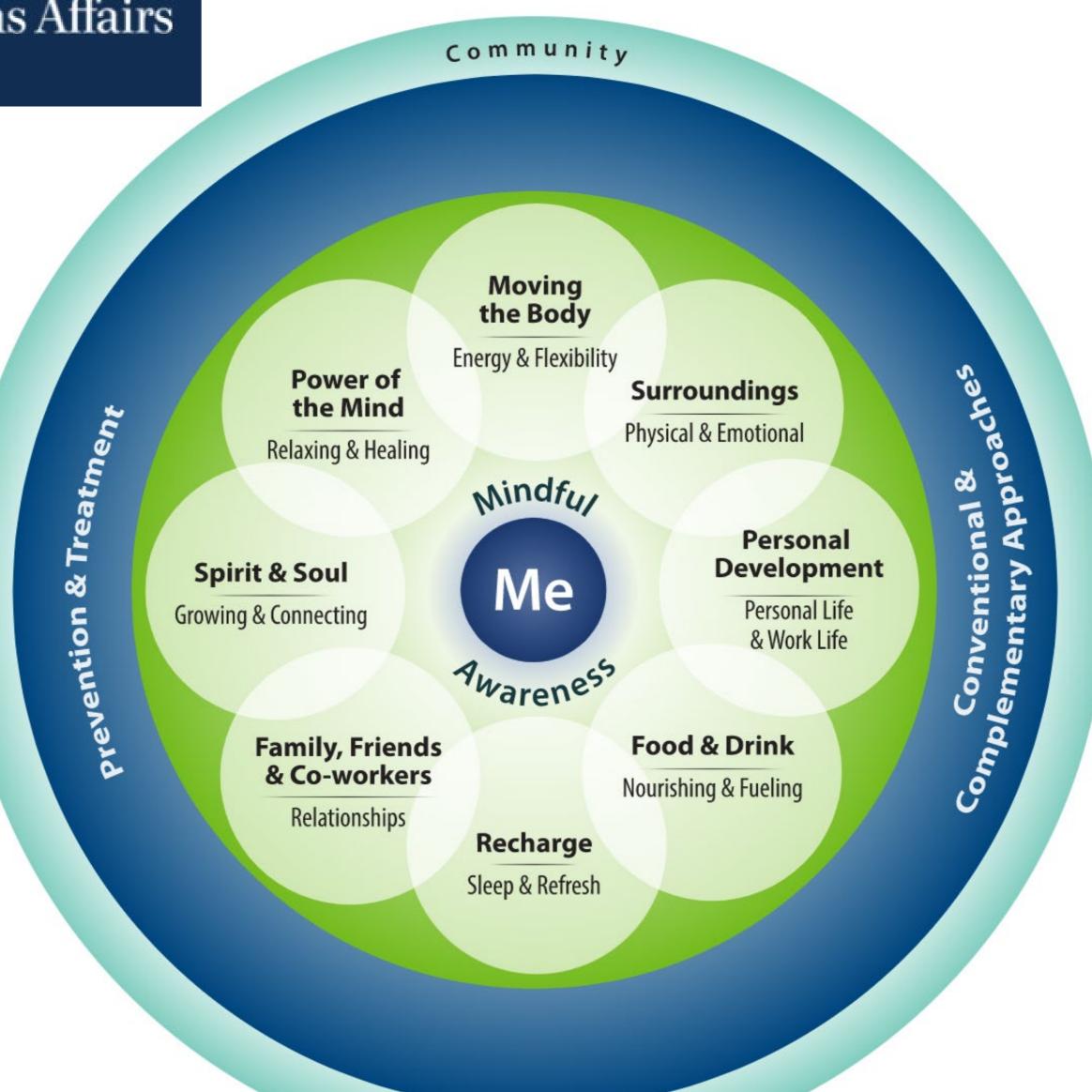






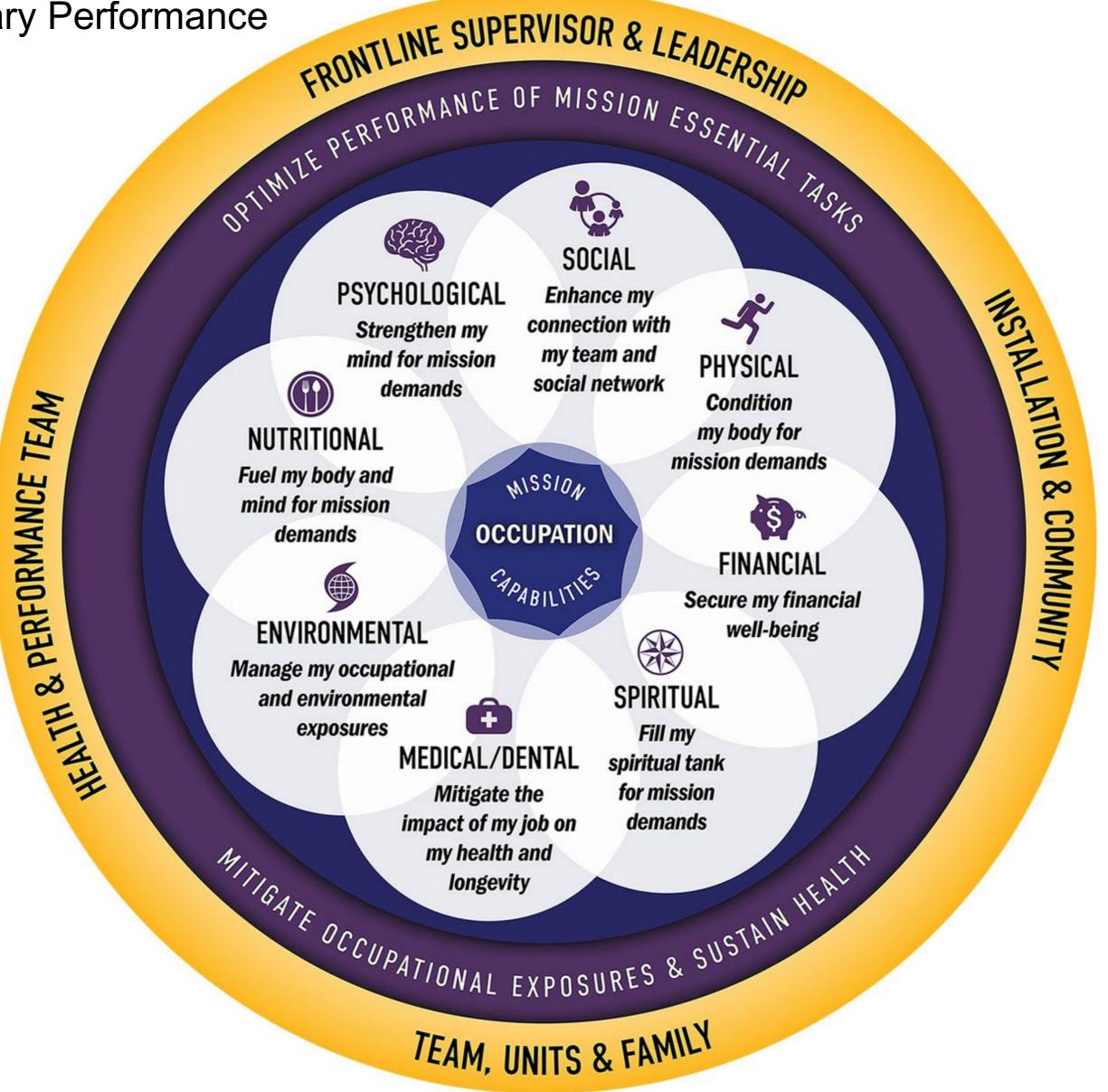
Whole Health centers around what matters to you, not what is the matter with you.

This means your health team will get to know you as a person, before working with you to develop a personalized health plan based on your values, needs, and goals.



The Circle of Health

Optimizing Warfighter readiness and performance, as well as maximizing the resilience of the global military family through leadership, community engagement, education, and conducting and translating human performance research.



Total
Force
Fitness
(TFF)

ARMY MEDICINE
Serving To Heal...Honored To Serve

Army Medicine has been transforming from a traditional health care system to a System for Health that maintains, restores and improves health through physical, emotional, social and spiritual fitness. As such, the Office of the Army Surgeon General developed several strategies to facilitate the transition to a System for Health including "Move to Health", which is built on the "Whole Health" program in the VHA.



Move to Health



Key Takeaways

- Whole person health is defined as empowering individuals, families, communities and populations to improve their health in multiple interconnected domains: biological, psychological, social and environmental.
- Health and disease fall on a continuum, where an individual can move from health to disease (pathogenesis) and from disease back to health (salutogenesis).
- Research on whole person health involves (i) exploring the fundamental science of interconnected systems; (ii) investigating multicomponent interventions or therapeutic systems; and (iii) examining the impact of these interventions on multisystem or multiorgan outcomes.



References

National Center for Complementary and Integrative Health. (2021). Methodological Approaches for Whole

Person Research Workshop. https://www.nccih.nih.gov/news/events/methodological-approaches-for-

whole-person-research

Prosperi, M., Min, J. S., Bian, J., & Samp; Modave, F. (2018). Big data hurdles in precision medicine and

Precision Public Health. BMC Medical Informatics and Decision Making, 18(1).

https://doi.org/10.1186/s12911-018-0719-2



Questions?

How to Obtain CE/CME Credits

To receive CE/CME credit, you must register by 0800 ET on 16 September 2022 to qualify for the receipt of CE/CME credit or certificate of attendance. You must complete the program posttest and evaluation before collecting your certificate. The posttest and evaluation will be available through 15 October 2022 at 2359 ET. Please complete the following steps to obtain CE/CME credit:

- 1. Go to URL: https://www.dhaj7-cepo.com/
- 2. Search for your course using the Catalog, Calendar, or Find a course search tool.
- 3. Click on the REGISTER/TAKE COURSE tab.
 - a. If you have previously used the CEPO CMS, click login.
 - b. If you have not previously used the CEPO CMS click register to create a new account.
- 4. Follow the onscreen prompts to complete the post-activity assessments:
 - a. Read the Accreditation Statement
 - b. Complete the Evaluation
 - c. Take the Posttest
- 5. After completing the posttest at 80% or above, your certificate will be available for print or download.
- 6. You can return to the site at any time in the future to print your certificate and transcripts at: https://www.dhaj7-cepo.com/
- 7. If you require further support, please contact us at: dha.ncr.j7.mbx.cepo-cms-support@mail.mil



