

## **Changing behaviour towards a healthy diet & lifestyle: what can be done to support implementation?**

Encouraging healthy changes such as improving diet, enhancing physical activity, stopping smoking, or managing body weight can help to lower LDL-cholesterol (LDL-C) levels, reduce the risk of atherosclerotic cardiovascular disease (ASCVD) and should be considered before and alongside pharmacological treatment <sup>1</sup>.

However, the huge potential of diet and lifestyle advice often remains untapped due to challenges with implementing sustainable behaviour changes in everyday life.

Offering practical guidance, setting goals, and monitoring patients are useful strategies to increase patients' motivation to modify ingrained habits. In addition, social support can facilitate successful lifestyle communication <sup>2</sup>. Gradual changes that can be sustained are hereby often more permanent than a rapid change in behaviour.

### **The Healthy Lifestyle Community Programme (HLCP) showed effective CVD risk marker reduction**

A real-world community approach was chosen to evaluate the effect of a 1-year controlled lifestyle intervention on body weight and ASCVD related risk markers in participants recruited from the general population in Germany <sup>3,4</sup>.

The intervention included an intensive phase (first 10 weeks with 14 seminars and 8 workshops) and a less intensive phase with monthly seminars. The focus of the intervention was on 4 areas of lifestyle change: a healthy, predominantly plant-based diet, physical activity, stress management and social health. Interactive sessions comprised cooking, exercise, and meditation exercises. Evidence-based content was presented using tangible examples and everyday language, employing concepts of nudging and gamification.

Compared to control without lifestyle intervention, significant reductions for cholesterol (total-C, measured and calculated LDL-C, non-HDL-C, remnant C), HBA1c, body mass index, waist circumference and resting heart rate (RHR) were observed after 10 weeks. Subgroup analysis indicated that healthy lifestyle changes can beneficially affect common carotid intima-media thickness (ccIMT) within one year, especially if baseline ccIMT is high <sup>5</sup>.

### **Communication skills – important levers for behaviour change**

Making Every Contact Count (MECC) is a behaviour change initiative set up as part of the UK's National Health Service's (NHS) plan to embed the prevention of most common noncommunicable diseases (NCDs) – including ASCVD - and health promotion into everyday practice of all staff. The staff is trained to deliver brief interventions targeting lifestyle behaviours, ranging from simply raising awareness of health risk factors to supporting behaviour change through discussion and encouragement.<sup>6</sup>

Healthy conversation skills have been identified as key facilitators for effective health promotion and encouragement:

1. Asking open discovery questions (“How” and “what” questions)
2. Listening instead of making suggestions or giving advice
3. Reflecting on practice
4. Setting goals using SMARTER (specific, measurable, action-oriented, realistic, timed, evaluated, reviewed) planning

Practical educational materials and resources to support motivating patients embarking on a healthy behaviour change are available for instance in the Educational Tool “Diet at the heart of CVD prevention” <https://www.dietattheheart.com>

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#### References:

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- 3 Koeder C et al. Effect of a 1-year controlled lifestyle intervention on body weight and other risk markers (the Healthy Lifestyle Community Programme, Cohort 2). *Obes Facts* 2022; 15:228-239
- 4 Koeder C et al. Healthy lifestyle changes can improve CVD markers in 10 weeks. Poster presentation at EAS congress 2022
- 5 Koeder C et al. Healthy lifestyle changes favourably affect common carotid intima-media thickness: the Healthy Lifestyle Community Programme (Cohort 2). *J Nutr Sci* 2022;11, e47:1-12
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