

**The following story appeared on National Public Radio
(NPR) on November 14, 2011**

**“Why Doctors And Patients Talk Around Our Growing
Waistlines”**

Background

The increase in obesity and type 2 diabetes in westernized societies is alarming. There is no objective metric currently available for doctors to use in assessing a person’s propensity to develop type 2 diabetes due to personal lifestyle choices.

Chronic insulin resistance (IR) precedes the clinical signs of type 2 diabetes (T2D) and cardiovascular disease (CVD) by years, possibly decades. It’s estimated that about 25% of the US non-diabetic non-obese population has normal blood glucose levels yet still have IR. New information is emerging implicating IR as the underlying risk factor for T2D and that irreversible damage has occurred prior to the diagnosis of pre-diabetes or T2D. Dr. Ralph DeFronzo, a noted diabetes researcher, has stated that 20-50% of a patient’s ability to produce insulin is irreversibly lost by the time pre-diabetes is diagnosed, and 50-80% is lost by the time T2D is diagnosed.

The next 4 pages depict on the left the actual word-for-word sNPR story . On the right, we show how the story could be re-written for doctors and patients if the Prevendia Test were available today.

Good News: With \$1.0 Million in funding, and 18-24 months of research and development, the test could be available for use –and it could be making a difference in this country and around the world for you, your relatives, and society.

Please contact rob@prevendia.com or mark@prevendia.com for more information.

STORY ON NPR, NOVEMBER 14, 2011

Why Doctors And Patients Talk Around Our Growing Waistlines

Today

OK, so you're overweight. So are two-thirds of all Americans. **Maybe you need a nudge to get going on a diet and exercise plan.** Maybe you've thought about talking with your doctor about weight-loss strategies. Well, a number of studies suggest you're probably not getting the advice you need.

Many patients say their doctors don't spend enough time, if any, talking with them about losing weight. But doctors often complain that when they do bring up the issue, nothing changes.

Lisa Flowers says weight is something she wishes her doctor would address more directly. At 47, Flowers stands 5 foot 7 and weighs nearly 300 pounds. She wasn't always obese. But after she had a baby five years ago and moved from Washington, D.C., to Delaware, she says her workout and eating habits got off track.

Flowers says she's brought up **her weight with her doctor, but the topic is "kind of avoided, almost as if he's uncomfortable."**

"It's sort of a beating around the bush kind of thing," she says.

Her doctor, on the other hand, insists that he and Flowers have discussed her weight and strategies to help her shed pounds. **But that's not clear in Flowers' medical chart.**

What is clear, says Yale University psychologist Rebecca Puhl, is that this kind of disconnect between doctors and patients is all too common. Puhl says just one-third of doctors surveyed say they talk with patients about losing weight. That means two-thirds don't.

IF FUNDED

The Future With Prevendia 's Insulin Resistance Diagnostic Metric

→ The Prevendia Blood Test will provide a score from 1 to 100, depicting a person's Insulin Resistance level – a precursor to diabetes. This can be used as the Nudge

→ The doctor can shift conversation from weight to the objective Prevendia Score. It can be used as the metric to share with patients, with trends clearly seen over time.

→ The metric, Prevendia Score, would not be as easily avoided. It is a test result.

→ The Prevendia score metric would be part of the medical chart.

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Living Large: Obesity In America

"When we consider that two-thirds of Americans are overweight or obese, these numbers should be higher," says Puhl, who studies weight-related stigma. "Even patients who are obese report they're not receiving any kind of weight loss advice from physicians." But it's not fair to "blame the doctors" if a patient isn't losing weight, says Dr. Cynthia Ferrier, an internist at [GreenField Health](#) in Portland, Ore. More than half of her patients are overweight or obese, and Ferrier says she spends a lot of time talking with them about their weight. Most are pretty savvy, she says — they know that high-fat, high-carb diets aren't healthy.

"It's as unreasonable to say I didn't quit smoking because my doctor didn't tell me to as it is to say I didn't lose weight because my doctor didn't tell me to," Ferrier says. "Everybody knows you shouldn't smoke, and everybody knows you should be at a healthy weight. It's not a mystery."

Ferrier says there are a number of practical reasons why doctors don't talk with patients about weight. With an average of eight minutes per office visit, many just don't have time. And until recently, doctors weren't reimbursed for weight counseling, only for treating conditions like diabetes and high blood pressure that result from being overweight.

And because doctors aren't taught about obesity in medical school, many feel unprepared to bring up the sensitive topic. And with good reason, says Ferrier.

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The Future With Prevendia 's Insulin Resistance Diagnostic Metric

It would be part of the medical chart. Irrefutable proof – doctors would be able to relate the Prevendia Score with obesity and IR, and then show how a patient's score links to IR and probability of progressing to diabetes.

Doctors can shift weight conversation to objective numbers which seems less confrontational and is easier to discuss.

Doctors would be reimbursed for the Prevendia Test and results.

Doctors can interpret blood test results, however.

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"I have had patients tell me that they have cancelled appointments with me because they have not lost enough weight," Ferrier says. "So, I do have to be careful about how strongly I word recommendations so it doesn't scare them off." Yale's Puhl says overweight and obese women can feel stigmatized by their doctors. She points to one recent Yale study that found healthcare providers often view obese patients as "unintelligent, dishonest, lying." For their part, obese patients are often so embarrassed, they stop going to the doctor, even for routine medical care.

Marcia Noyes, 51, is training for her second marathon. She was overweight for most of her life, and lost 80 pounds in 8 months and qualified for the Boston Marathon.

Marcia Noyes, 51, was overweight for most of her life. Over the year, she says she avoided the doctor at all cost. "It was very shameful — gowns don't fit and you feel like you're looked down on from the nurse to everyone in the doctor's office," she says.

When Noyes told her doctor she wanted to lose 80 pounds in eight months in order to qualify for the Boston Marathon, he told her that she should "give it her best shot," but he was clearly not supportive, she says.

Eventually, Noyes turned to a friend, a marathon runner who helped her diet and meet her weight-loss goals. Today, Noyes is training for her second marathon.

Ferrier says that for many patients, the motivation they need is straight talk about the health risks they face from being obese.

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The Future With Prevendia 's Insulin Resistance Diagnostic Metric

→ People are less stigmatized by test results, similar to current understanding and receptivity to cholesterol test results

→ The Prevendia Score is "Straight Talk." Scores will predict "retrospective" likelihood of the onset of Diabetes or Heart Disease.

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For example, "if I have seen blood sugar go up every year and now it's near pre-diabetic range, I can tell them in very clear terms how likely it is they will be diabetic," with all its severe and costly complications, she says. "If that doesn't motivate them, there's not much more I can say."

Many doctors agree: This type of clear and direct approach may be exactly the prescription needed to begin to turn the tide in the battle against obesity.

IF FUNDED

The Future With Prevendia 's Insulin Resistance Diagnostic Metric



Current blood sugar tests show the end result of chronic IR and the irreversible destruction of insulin production capability.

Prevendia's objective IR score would provide the patient & doctor actionable information which reinforces treatment recommendations.

Over time, the patient can see their Prevendia Score trend as another clear indication of progress (or not) in lifestyle modifications focused on preventing type 2 diabetes.