Do we Practice what we Preach?

Doctors and especially general practitioners play an important role in health education and devote huge efforts to improve their patients’ nutritional habits. This study has been performed in order to assess doctors’ nutritional habits and to find out whether they follow good advice or not. I am convinced that patients take our advice more favourably if they observe that we practice what we preach.

In 2000, one hundred general practitioners from Budapest (67 women and 33 men) were asked to fill out a questionnaire containing 16 questions with regard to their nutritional habits. As a consequence of their life style, the majority of their food consumption is at dinner, with very little food eaten throughout the day.

Diagram 1: The distribution of the daily nutriment intake (self estimate on a scale from 1 to 5)
Source: Author’s diagram based on the 2000 questionnaires

According to the questionnaires, general practitioners in Budapest generally eat the minimal amount of food and liquid during daytime. Consistently, their daily fluid consumption is only 1.2 litres per day in, as can be seen in diagram 2.

Diagram 2: Distribution of daily fluid consumption (dL)
Source: Author’s diagram based on the 2000 questionnaires
While men generally eat hot dishes at least once a day every day, women only do so 4 times a week. More than one third of women do not have lunch at all. This ratio is only 13% in the case of men. 50% of men eat lunch in the comfort of their home but only 29% of women do the same. 26% of women eat a cold meal for lunch on the go, which is not as popular among men. 39% of the women questioned do not have any lunch at all on weekdays, while the percentage among men is only 11%. 81% of men questioned have three-course lunches weekends with their families. One quarter of physicians follow a special diet. 48% of the women who are on a diet want to lose weight; the percentage among men is 18%. The ratio of vegetarians was the same among the two genders. One fifth of the women and men were vegetarians. This is a relatively high number when compared to the general population.

Almost half of the respondents take some kind of vitamin product regularly. Furthermore, half of the doctors snack throughout day. According to the study, a general practitioner drinks an average of two cups of coffee daily. When it comes to selecting food, men are more likely than women to choose the tastiest foods. Women prefer ingredients which can be prepared easily. Cost appears to be a negligible factor in their food choice. For women the second most important factor is that the food they choose should be healthy. For men this is the second least important factor. General practitioners eat dairy products, fruits and vegetables almost every day, but they consume meat only 4 times a week. Doctors evaluated their own nutritional habit as medium level.

General practitioners play a distinguished role in health education even if they are not able to comply with these principles fully (probably because of their running life style and pressure of circumstances).

There are several new studies on the health condition of doctors. The biggest studies have been made in the USA (1) and in the UK (2). In Hungary in 2004, Drs Rubik and Kalabay (3) conducted a study among the doctors who graduated from Semmelweis University 25 years ago. The questionnaire contained demographic, somatic and morbidity data. The doctors participating in the study had to classify their own health status and lifestyle. They found that both BMI (Body Mass Index) and bodyweight had increased among both genders. The most remarkable bodyweight increase was detected among men working in primary health care (average 14.3 kg) and among women working in sedentary specialties. The men who work in primary health care had the highest BMI (average 27.4). Most of the smokers worked as surgeons and in primary health care (in this case, mostly women). Another, similar study compared 454 medical workers’ health condition, lifestyle and health attitude in Szeged (Hungary) and Szabadka (Serbia) (4). Most of the nurses from both cities (roughly half of them) did not smoke (among the Serbian nurses there were more non-smokers). Nevertheless, the doctors in Szabadka smoked 20 cigarettes more a day than their counterparts in Szeged. 41.4 % of the doctors from Szeged did not drink alcohol, in Szabadka this ratio was a bit higher (44.7 %). There were some non-coffee drinkers in Szeged (19.2%) and Szabadka (21, 7%) as well. The most common amount consumed was 1-2 cups of coffee a day but there were many participants who drank 3-4 cups daily. Coffee addiction, meaning six cups a day or more was only observed among the Hungarian doctors (2.5%). It is alarming that most of the medical workers, including the Hungarians and Serbians, have at least one addiction!

In another study by the Medical University of Debrecen (Hungary) (5), 188 medical workers aged over 35 from 9 clinics were investigated. They had to rate their own health condition on a 1-5 scale. The average score was 3.99. 39% of the nurses were smokers and on average they smoked 13.2 cigarettes per day. 89% of the nurses attended screening examinations voluntarily on a regular basis. Consequently, neither doctors nor medical workers pay enough attention to their own health (6). The rates of consuming non-essential nutrition, smoking and alcoholism among doctors and medical workers are not lower than the general population either in Hungary or throughout neighbouring countries. We should be taking better care of each other!

If we make a positive precedent, then our patients will take our advice more seriously (5).

**Take home messages**

- Our personal nutritional habits and the professional focus of doctors and medical staff are not balanced – we don’t practice what we preach.
- We should pay more attention to our and also our colleagues’ health!
- We should make some positive precedents if we want our patients to take our advice more seriously.

**Original abstract**

http://www.woncaeurope.org/content/465-do-we-practice-what-we-preach
References

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