Every year, the Wisconsin Medical Society president chooses a theme regarding a particular area of health care. For those who have kept track, the previous 3 presidents addressed the issues of falls prevention, health care access, and patient safety. There is a relative timelessness to these topics.

My focus this year is to consider the role patients can play in taking more responsibility for their own health and health care, a form of patient empowerment. As physicians, we can create a paradigm shift, helping individuals to understand that they are not powerless to make changes and that they can influence not only their own health, but health care in general.

There are numerous statistics regarding the state of health care in America. The Congressional Budget Office notes that health care spending already comprises 16% of our gross domestic product ($2 trillion), and may be 25% by the year 2030 if current trends continue. According to a study by the Centers for Medicare and Medicaid Services, Americans over age 65 represent one eighth of the population but account for one third of health care costs. By 2030, it is projected that they will represent one fifth of the population, but account for one half of health care costs.

Health care costs are increasing at a rate faster than inflation; meanwhile, the number of insured in this country is 47 million and rising. In some regards, it is uncertain that all of the resources devoted to health care have led to a healthier society. The percentage of Americans who are considered obese has slowed its rate of growth, but is still over 30%. Nearly 25% of Wisconsin residents have a body mass index >30. The incidence of diabetes in younger age groups has soared. It is projected that the average life expectancy of future generation will be lower from ours.

As a nation, we spend more per capita on health care than any other country, yet our measures, such as life expectancy, infant mortality, and quality of our health lag behind other countries, particularly those in Western Europe and a few in Asia.

We understand the implications poorly controlled costs have on society. The more that is spent for health care, the less there will be for schools, infrastructure, defense and other national priorities.

Some of the proposed solutions make interesting reading. There have been economic incentives suggested, including health savings accounts. Our state legislature has looked at publicizing the relative costs of various procedures by providers. A number of studies have examined quality measures and pay for performance. Several proposals have focused on reducing paperwork and other administrative health care costs.

All of these ideas have merit and may bear useful results in the future. However, they all ignore the impact an individual can have when he or she takes charge of his or her own family’s health and health care.

A number of things can be done immediately that do not require an act of Congress. We can control what we eat or drink, whether we use tobacco, alcohol, or drugs, when we exercise, when we wear seat belts, whether we drive without distractions, and whether we follow the recommendations of our health care professionals. But we need help as individuals.

A health policy analyst recently mentioned 4 things that would provide the most return on investment in health care: (1) avoiding tobacco, (2) providing immunizations, (3) obtaining moderate exercise, and (4) treating depression.

As parents and citizens, we have a special responsibility to our children. We exercise control over what our children eat at an early age. We control what foods come into our homes and can advocate for healthy foods in our schools and vending machines. We can address the issues

Doctor Chou is a psychiatrist in Milwaukee, Wis. and president of the Wisconsin Medical Society.
of tobacco, alcohol, and drugs with our children and model good health habits for them. They can learn at an early age the importance of seat belts and bike helmets, and mental health issues should have the same priority as physical conditions. We need to teach our children to live healthier lives, not to live carelessly or even recklessly and expect a solution or a treatment to rescue them. And we need to do the same.

Unfortunately, in too many cases, patients are unwilling to take the necessary steps to improve their health. We need to understand why.

Recent studies show that tobacco use decreases, especially among young smokers, as the price of cigarettes increases. Another study showed that pedometer use influenced the number of steps the wearer took compared to someone not wearing one. It seems that being a part of a group may lead to changes in behavior that are less likely to occur alone (ie Alcoholics Anonymous, Weight Watchers). If people are increasingly responsible for the costs of their own health care, will it make a difference? Will they forego necessary care in order to hold down the cost?

There are several articles in this issue of the Journal that explore ways physicians can help empower their patients. Physicians have a major impact on the decisions our patients make regarding their health. We give them timely, well researched and useful information. We attempt to separate the wheat from the chaff in reviewing the flood of medical information our patients receive from various sources, including the Internet. We should understand, encourage, and promote health literacy, making sure our patients understand their treatments, medication, and our directions.

As physicians, we can advocate for broader change as well. For example, we can urge insurers to promote policies that encourage prevention, including screenings for preventable conditions, starting with prenatal care. They can subsidize memberships for basic health clubs or gyms. Medications that lead to stability outside of a hospital or a long-term setting should be appropriately priced.

We can also urge businesses to encourage healthier lifestyles among their employees, using both incentives and disincentives. And as payers for health care, they can influence insurers to provide similar parameters on their insured populations.

The physician-patient relationship is different today than it was when I went to medical school. And it is important now more than ever that we help our patients become more empowered to take charge of their own health and health care.
The mission of the *Wisconsin Medical Journal* is to provide a vehicle for professional communication and continuing education of Wisconsin physicians.

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