

# PREVENTION OF HYPERTENTION, HEART RELATED DISEASES AND MUSCULO-SKELETAL DISORDERS @ NJI NOVEMBER 2016

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By

DR O.A. ADETOLA MBBS AFCGP.



# REASONS FOR CHOICE OF TOPIC :

- I recall that I presented a similar topic at the All Judges conference for the superior court of records in November 2015.
- The chief difference was the terms Prevention and Control!
- The assumption of the planners of this conference is probably that Hypertension et al can still be prevented in this group of judges in the Lower courts on account of joining the lower courts at a younger age!
- However our experience as medical examiners and personal physicians in the Judiciary for 15years does not concur with such!
- Rather Hypertension et al are under other influences beyond age!. They can be proactively managed and controlled!

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# CARDIOVASCULAR HEALTH SCREENING.

- Age > 40 years
  - Race: Negroid
  - Gender: Male or post menopausal
  - Family history of stroke, heart attack, sudden death etc
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- Hypertension
  - Overweight/ Obesity
  - Kidney disease
  - Alcohol consumption
  - Emotional issues
- Diabetes
  - High blood cholesterol
  - Insufficient exercise
  - Tobacco smoking
  - Poor stress management

# Case study no 1

- ✦ The brother-in-law of the 45 year old magistrate married to a nurse sought an urgent consult. The BP was consistently around 160/100. A tertiary hospital ordered more investigations ( expensive) without promptly normalizing his BP
- ✦ He was not exercising. His stress was much i.e. travelling to Ibadan by road and driving to pursue a master degree program in Law! He was also a pastor.
- ✦ I met him defeated and discouraged! He had well guided breathing/ stretching exercises. His BP medication was increased. He was told to trek 60-90minutes daily. His diet was modified with emphasis on salt and oil reduction. He was advised to stop driving long distance.
- ✦ Within a week his BP was 110/75 with increasing stamina

# **SEQUENCE/ PROGRESSION OF CARDIOVASCULAR DISEASES.**

**Stage 1: Absolute normalcy of key health parameters i.e. Blood pressure, Fasting blood glucose, Fasting blood cholesterol, normal BMI**

**Stage 2: Emergence of Lifestyle diseases i.e. Blood pressure > 120/80, FBG > 5.5mmol, Fasting blood cholesterol >5.2mmol/l. Issues of overweight and obesity become manifest. Little or no symptoms at this stage.**

**Stage 3: Early signals of cardiovascular disease manifesting as alarm symptoms i.e. headache, dizziness, fainting spells, poor balance, chest pain, breathlessness with mild exertion, BP >140/90, abnormalities of ECG, Heart enlargement , abnormalities of kidney function, Erectile dysfunction, slump, TIA,**

**Stage 4: Sudden calamities/catastrophes i.e. Stroke, heart attack, heart failure, kidney failure, sudden death, premature death**

- ▶ WHAT STAGE ARE YOU NOW? PROGRESSION FROM STAGES 2 OR 3 TO STAGE 4 CAN BE TRIGGERED BY PRESSURE OF WORK, POOR STRESS MANAGEMENT, INFECTION, EXERTION, POOR EMOTIONAL MASTERY ETC**



# CASE STUDY 2.

- **A distress call at 2am by a known client of the practice. He was alone in his hotel room, feeling extremely restless and desperate. I perceived a life and death situation.**
- **He had been attending his senior brother's burial in Kano. Lots of sitting, chewing kola nut, no exercise!**
- **I diagnosed a hypertensive crisis! Time was of essence. Advised to perform a breathing maneuver for 20minutes .**
- **He called back to acknowledge improvement. Further progress made by drinking liberal amounts of water.**
- **At 6.0am he responded well to a 1hour walk. See Abuja!**



Neck strain  
Neck pain  
Neck stiffness  
Neck discomfort

Lower back pain  
Lower back stiffness  
Lower back discomfort  
Lower back strain

Foot pain  
Foot discomfort  
Foot strain  
Foot stiffness

# CASE STUDY 3

- **The judge had been experiencing back pain and neck pain over the past few weeks! He had self-prescribed pain killers but decided to seek consultation when his otherwise normal BP became elevated with symptoms.**
- **When he was told to demonstrate how he sat, wrote, drove and lied on his sofa he failed the posture test!**
- **Routine x ray of the back and neck bones showed features of accelerated and posture related changes in the back and neck bones of the spine.**
- **He was given posture education. He responded to multiple physiotherapy sessions for the back and neck.**
- **A letter to his office to change his big for nothing chair to an ergonomically compliant one hastened his recovery.**



# CASE STUDY 4

- We checked the Judge in the bosses' office 180/120mmHg. He gave excuses as to imperfection
- We gave him 2 weeks to rearrange self i.e. diet, exercise , drugs etc. Parameter still elevated.
- We pointed out that the late father died suddenly around age 60! Behold the judge is approaching the age with all the raw materials for sudden death hovering around him.
- We advised immediate appraisal . He opted to wait another 3 months before travelling abroad for check up.
- He was instructed that it was unbecoming of a learned man to identify a problem and not address it promptly. We volunteered to repackage him to wellness so that his visit abroad could now be an audit of our care.
- He travelled abroad and came back with a good report!



# CASE STUDY 5

- At 6am, a distress call from the wife of the 52 year old client that he was lying down on the bed , uncommunicative and unresponsive!
- Knowing the health background, I advised that the blood glucose reading be checked immediately.
- I advised that something sweet i.e. juice, coke should be administered to him. He improved within few minutes.
- 3 hours later he was seen in the clinic. He admitted being unwell 5 days earlier! Delay caused by financial challenge!
- Investigations: Background blood infection with shock ! He was aggressively treated and fully recovered!

# THE CHALLENGES OF DECISION

- ✓ In the event of a complaint, the challenge is to rationalize with questions like do I address it now or later?
- ✓ I need to finish that judgment soonest
- ✓ I will use panadol for the headache or chest pain
- ✓ I will use valium for that sleep challenge
- ✓ I will use viagra for that decline in sexual department
- ✓ I will manage this complaint after all in few months time I will address the problem when I travel abroad on holiday.
- ✓ I will see my doctor/ when I am not sitting
- ✓ Is this spiritual attack? I will see my malam / pastor
- ✓ I will travel to Lagos to see my doctor at weekend.
- ✓ I will send for the court clinic staff to come and measure my BP and blood glucose
- ✓ I will continue to use my prescribed drugs supplements etc.

# **THE WAY OUT**

- **Before you unconsciously make an unguided decision on a potential life threatening situation, Ponder on these:**
- **What stage am I in the Cardiovascular progression chart?**
- **Am I a low risk or high risk in the Cardiovascular risk assessment chart?**
- **Blessed is that man or woman with a good spouse to mind their case**
- **Blessed is that Judge who has a physician to consult on the phone at short notice for guidance.**
- **Blessed is that judge whose Physician gives strong oversight.**
- **Blessed is that judge who is not suffering from discouragement**
- **Blessed is that judge whose friend / colleagues alerts him**
- **Blessed is that judge whose Chief Registrar spots him out**
- **MOST HEALTH ISSUES ARE NOT INSURMOUNTABLE! DELAY IN SEEKING GUIDANCE, FROM THE COMPETENT SOURCE IS THE KEY TO PRESERVATION.**



# PERSONALISED CARE ?

- Know yourself. Be true to yourself. Respect yourself.
- Frequent hospitalization. Incur high medical bills.
- BP consistently  $>140/90$  and FBG  $> 10\text{mmols/l}$
- Ravaged by aches and pain: back/neck/ shoulder.
- Presence of alarm symptoms: headache, chest pain, Shortness of breath etc.
- Presence of multiple diseases: Hypertension, Heart disease, Diabetes, kidney disease, survivors of stroke.
- Productivity issues: Lagging behind in work schedule.
- Challenges of conjugal function. Poor sleep.

# **FOUNDATION PREVENTIVE CLINICS**

**Medical Examiners/ Auditors.**

**Stress Management/ Fitness consultants.**

**Lifestyle disease managers**

**Disease Prevention Advisers**

**Personal / Family/ Corporate Physicians**

**Health Enlightenment/ Motivational Speakers.**

**Accompany and Oversee client' s medical care abroad**

# THANKS FOR LISTENING

- **Dr. Olusesan A. Adetola** *MBBS, AFCGP*

*Foundation Preventive Clinics*

Suite 205, Fabdal Plaza,  
Plot 2219, Constantine Street,  
Wuse Zone 4  
Abuja.

Tel. 08037053361

E-Mail: [ooa2010@hotmail.com](mailto:ooa2010@hotmail.com)

[www.foundationpreventiveclinics.com](http://www.foundationpreventiveclinics.com)