

PREVENTION BEATS CURE

Governments are backing preventative medicine to cut the cost of productivity losses. **Report: Georgina Dent**

● Sneezing may seem innocuous, but it is expensive for business.

An employee afflicted with allergies will, on average, suffer 50 days a year and, on each of these days, will lose two to three hours in productivity. They will also be absent two or three days more per annum than their healthier colleagues.

The illness of an allergy-afflicted employee earning \$55,000 a year can carry an annual price tag of \$788 in lost productivity. Considering one in three working Australians suffer hayfever, the costs in just one business can escalate fast.

It is metrics such as these that have convinced governments, state and federal, to invest in preventative health measures, says Dr John Lang, chief executive of Good Health Solutions, a corporate health management company. "It's on the basis of figures around the loss of productivity associated with chronic illness that [governments] are now spending."

The Victorian government, for instance, has allocated \$218 million to provide a 15-minute face-to-face health check to each of the state's 2.6 million workers.

Federal Health Minister Nicola Roxon announced an \$874 million funding package for prevention last December, of which more than \$300 million is to be spent at the workplace to help employees recognise health risks and provide support and interventions.

In 2007, Good Health Solutions set out to measure, in dollar terms, the cost of chronic conditions for individuals and employers. A chronic condition is defined as any medical illness that persists for longer than six months.

The resulting Health, Absence and Productivity Survey was completed by 7000 working people in 27 companies across several industries, ranging from small to large, and private to public.

Combined with the prevalence of chronic illness in Australia, Lang says, the results are startling. "Within Australia's



working-age population, people average between two and three chronic diseases each and also average four risk factors for cardiovascular disease," he says.

"The government has a big problem – they've got 10 million working Australians with a couple of chronic conditions each, and most of them won't engage in any constructive dialogue with their doctors around any of these issues."

Lang says the good news is that most chronic conditions can be improved with careful intervention. The bad news is that the current system fails to do that.

"The federal government spends around \$100 billion on health [annually] – 70 per cent of that is spent on chronic conditions, and 70 per cent of those conditions are caused by lifestyle factors – nutrition, exercise, smoking," Lang says. "Essentially \$50 billion is spent on preventable diseases, but the government only spends 1.8 per cent of its budget on preventative measures. There's the paradox – 1.8 per cent spend on 50 per cent of your problem."

The reason for this is that the current system is geared to be diagnostic and curative, rather than preventative. "If the government is serious about being preventative and proactive – the only place they can imagine that happening is the worksite," Lang says.

"The beauty of the workplace is you have a captive audience, the venue is supplied, and often [companies] are prepared to fund it and provide time release for employees to participate."

Sick and tired: Most chronic conditions can be improved with careful intervention

The alternative to the workplace, as an extension of the health system, is untenable. "If we had to do this [promote a preventative approach] by extending the current health-care system, we'd have to train more doctors, more nurses, build more hospitals and medical centres etc. It would be an unmitigated disaster."

Face-to-face health checks in the workplace can play a big part. "In terms of standard behavioural change – someone can't change unless they know they need to," Lang says.

"If you go to the doctor without any proposed change to your lifestyle and find out you have high blood pressure and cholesterol problems – all of a sudden you will move from pre-contemplative thoughts to contemplating lifestyle changes. The idea is to push [sick people] through these changes."

Budgetary constraints make it more difficult, but Lang says comprehensive health consultations that include physical tests are the most effective tool to begin the process of change.

"Roughly 2-3 per cent of people will say they have blood pressure or cholesterol problems, but if you measure it, you find between 30-50 per cent have a problem," Lang says. "You have this 10 to one under-reporting the issue – simply by virtue of their ignorance and never having the tests. That's why face-to-face health checks are always best." **BRW**

PREVALENCE OF CHRONIC CONDITIONS IN AUSTRALIANS

| Chronic Condition | Prevalence (%) |
|-------------------------------|----------------|
| Neck/back pain | 57.41 |
| General fatigue or low energy | 50.32 |
| Other headaches | 45.44 |
| Sleeping problems | 40.27 |
| Allergies/hayfever | 31.14 |
| Migraines | 23.53 |
| Overweight/obesity | 21.56 |
| Asthma | 14.88 |
| Arthritis | 13.19 |
| High blood cholesterol | 12.61 |
| Irritable bowel syndrome | 12.14 |
| High blood pressure | 10.81 |
| Chronic pain | 9.18 |
| Chronic heartburn | 6.28 |
| Stomach/intestinal ulcer | 4.88 |
| Heart condition | 4.42 |
| Skin cancer | 3.54 |
| Chronic bronchitis/emphysema | 2.79 |
| Diabetes | 2.56 |
| Osteoporosis | 2.09 |
| Other cancer | 1.57 |

Source: Good Health Solutions – Health, Absence & Productivity Survey 07