

CASE STUDY

A New Lease on Life

Lewis Whelchel

*BeneFIT Corporate Wellness, Clinical Health Coaching
Populytics, Care Coordination*

Lewis Whelchel, 60, has multiple health conditions and in the past, was reluctant to see a doctor regularly. However, things changed when he had an outreach from BeneFIT Corporate Wellness about its Condition Support program.* He was eligible due to his Type 2 diabetes diagnosis. Once he started working with Clinical Health Coach Raelah Miller, RN, his life took a turn for the better and Whelchel is forever grateful.

*“I can’t imagine what my life would be now if I hadn’t had coaching.
I became committed and I’m still committed.”*

Some of the elements that helped change Whelchel’s mind

- Letting the patient set the goals, with non-judgmental input from the care team
- Building a trusting relationship between coach and patient
- Receiving expert guidance on medication and its management
- Introducing the benefits of healthy behaviors one at a time
- Starting with small goals and building on each one
- Getting motivated by successful results

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Problem

Lewis Whelchel, 60, has multiple chronic health conditions ranging from Lewy body dementia and Parkinson's disease to Type 2 diabetes, REM sleep disorder, bipolar disorder II, social anxiety disorder, and general anxiety disorder. The latter conditions contributed to a sense of denial about seeing a doctor regularly and a general "I'd rather ignore it" attitude. Fortunately, he received an outreach from the Condition Support team at BeneFIT Corporate WellnessSM.

Clinical Health Coach Raelah Miller, RN, was able to encourage Whelchel to begin working with her. He admits that he was hesitant about the concept of coaching, partly because he was afraid it would be manipulative. "She was able to convince me by explaining exactly what she could do to help," says Whelchel, "and I was ready to take any opportunity to improve my health."

At that point, Whelchel wasn't checking his blood sugar and was self-medicating with insulin, not as directed by his primary care physician. His blood sugars were in the 500s and his HbA1c was 11.8*. His perspective was he didn't want to be seen by his provider until his numbers improved.

"I have a lot of co-morbid conditions in addition to diabetes, and I thought if I dealt with the diabetes first, I could face the other issues. I tried to put it off but it wasn't working."

Building awareness around Whelchel's mindset is where Miller started. From there, through motivational coaching and resource collaboration, she helped create a complete support network for Whelchel that ultimately turned the page in his favor.



Solution

Lewis Whelchel, chronically ill and disabled, started weekly sessions with Clinical Health Coach Raelah Miller, RN, in January 2022. The key to Whelchel's engagement in the program was the trusting relationship Miller was able to establish. Based on this and Miller's recommendations, he decided to see his doctor months earlier than he planned. His primary care physician connected him to an endocrinologist, who made significant adjustments to his medication and provided education on his conditions.

From there, Miller referred Whelchel to Populytics Care Management, where a case manager followed up with him to make sure he was adhering to his medication and care plan. Miller brought in the Populytics Clinical Pharmacy team to work with Whelchel and his providers on his complex medication list and made further beneficial adjustments. (See the following Pharmacology Perspective for more.)

Depression was a barrier to compliance, which was addressed in Miller's and Whelchel's conversations and led to closer connection with his therapist.

In their coaching sessions, Miller and Whelchel set behavior change goals and talked weekly for accountability. As a result, Whelchel began checking his blood sugars as directed and taking his diabetes medication as well as other medications – as prescribed – 100 percent of the time. They also addressed barriers to his care including finger sticks and having diabetes supplies at home: he now has a Dexcom wearable for better glucose management.

“*I feel both mentally and physically better, more alert, and engaged in life.*”



Today, Whelchel's blood glucose is within normal range and his HbA1c has decreased from 11.8 to a controlled 6.8. He is exercising daily and focusing on his eating pattern to take his chronic disease management even further. He is working with a registered dietitian at LVHN's Helwig Health & Diabetes Center and he and Miller continue to check in on his current goals of adding more vegetables and reducing carbs in his diet.

“Above all, it was my coach's delicate and simple way of taking small steps and seeing little successes that really made the difference. She has extended my life by several years or more. Never in my wildest dreams did I imagine an A1c of 6.8, yet that is what I have!”

“This was truly a team effort between my coach, dietitian, pharmacist, and others, each having something to add or suggest, which has dramatically improved my health and well-being.”





The Pharmacology Perspective

Jaclyn Burke, PharmD, BCPS

Clinical Pharmacist, Populytics

Burke began working with Lewis Whelchel in February 2022, prompted by a referral from Clinical Health Coach Raelah Miller. At that time, the patient was already improving his adherence to his diabetes medications but Miller recognized a need for further education, as the patient had questions related to his medications for Parkinson's and psychiatric disorders. Burke completed a full review of all of his medications and assessed his adherence. As a result, she recognized the need for some medication changes.

As noted in the story above, the patient saw an endocrinologist and was initiated on a new medication for diabetes. Burke worked with the patient closely and she titrated it up to help prevent side effects. "The patient was able to titrate up to the full dose successfully," she says.

"I also provided extensive education about blood sugars and their fluctuations throughout the day, appropriate management of high and low blood sugars, and emphasized the need to remain adherent," says Burke, noting that continued education was crucial in gaining control of his diabetes.

"I think the follow-up from the team is what helped Lewis remain adherent. When he falls slightly off track, one of us is there to help remind him."

Initially one of Whelchel's concerns was his uncontrolled Parkinson's symptoms. Burke had recommended a new medication, which was added by his provider. Burke collaborated with his provider to have the doses increased and timed differently to better control his symptoms.



“His symptoms have progressed, which unfortunately is typical of the disease process but we continue to have discussions about medications that could be added as well as removing medications that may be contributing to his symptoms,” says Burke.



Another reason Whelchel was referred to Burke was because his **psychiatrist wanted him to come off two of his psychiatric medications** that he felt might have been contributing to his other symptoms.

“Lewis was hesitant because he was concerned his mental health would decline,” says Burke. “We discussed these medications extensively over the past few months and just recently Lewis is more on board with titrating off one of them. I will work with him closely as he does this in the hopes that it can alleviate his symptoms without affecting his mental health.”

Burke is continuing to follow Whelchel due to the many medication changes that she has made.

More Successes

As of this writing, due to the effects of his lifestyle changes, Whelchel’s **hypertension is in remission** (no hypertension while not on blood pressure medication), so his cardiologist has **taken him off his blood pressure medication**. One of his diabetes **medications has been reduced**. His **Lewy Body Dementia diagnosis has been changed** to Parkinson’s dementia, which he will be addressing with neurological occupational therapy and neuropsychology providers.