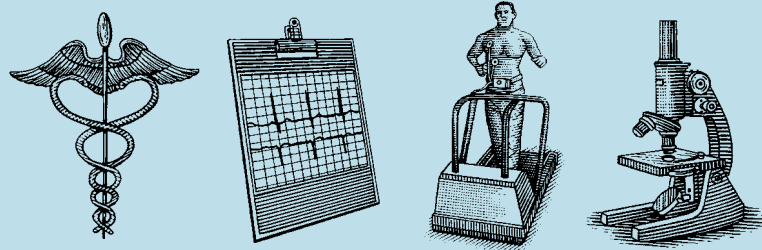


# MATERIAL COMFORT

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## SMART ADVICE FOR SMART PEOPLE



# The Big Physical

## Where to Go, What to Get

BY MIKE OFFIT

**W**hile getting old may beat the alternative, living in denial is a comfortable choice—and a lot more pleasant than your first colonoscopy. The annual checkup at your doctor’s office covers the basics, but a truly thorough medical exam will involve trips to several offices, with the usual long waits and patients stacked up like planes over Chicago’s O’Hare. Two years ago one of my closest friends died from a coronary that absolutely could have been prevented had he only taken the time from his crazy work schedule and family obligations for a checkup.

With baby boomers starting to age, there has been a proliferation of facilities offering comprehensive “executive” physicals. Having just turned 50 myself, I figured this might be a good time to see how the exams—and my body—have evolved. Among the best-known options, the Mayo and Cleveland clinics, along with the Johns Hopkins, Duke, UCLA, and Stanford units, are all associated with major hospitals—which is useful should serious complications be found or immediate treatment be recommended. According to the Mayo Clinic, less than 5 percent of its exams revealed potentially life-threatening conditions and almost half exposed risk factors for serious illness. These centers draw patients from all over the world and focus not just on medical needs but a lifestyle approach as well. The Cleveland Clinic even offers programs through the Canyon Ranch spa resorts. Also available are a number of private diagnostic centers that

only perform physical exams, such as the Princeton Longevity Center in New Jersey and Texas’s Cooper Clinics. I chose the PLC strictly for its convenience, but some might be more comfortable going to a hospital. Others prefer to go the true luxury route and turn their physical into a spa holiday or fit it into a resort vacation. To me, though, the chance of getting some bad medical news before my kelp facial could be a real buzz kill.

As at most centers, the day in the PLC started at the scanning facility, replete with state-of-the-art, 64-slice CT machines. I was then shuttled around the main office, given every sort of workup imaginable, and promised a full report on my mortality within hours. Some centers recommend full-body CT scans for patients over 45. While they can be lifesavers, they are also controversial. Dr. Reginald Munden, interim chair of the department of Diagnostic Radiology at the University of Texas M. D. Anderson Cancer Center, says, “I’m not comfortable with a shotgun approach to screening,” citing the limited sensitivity of scans to common cancer lesions and the small but significant increase in cancer risk from more radiation exposure. There is also the issue of false positives: Up to 80 percent of such tests may find something that can lead to what Munden calls a spiral of expensive and anxiety-provoking follow-up scans with few meaningful results. Interestingly, just as risky can be false negatives—being told the scan shows no problems to be concerned about. This can lead some people to continue damaging behavior, such as smoking, or to ignore new symptoms. **CONTINUED »**

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Of course, there are many stories of serious problems being caught. Doctors at the clinics have received numerous e-mails from patients whose renal cancer or developing aneurysm was detected early, possibly saving their lives. In fact, the day I was at the PLC an ex-investment banker discovered, after 53 years, that he was born with only one kidney. Balancing the risks against the benefits of a scan is a personal decision, and any clinic should provide you with plenty of information to allow you to make an educated evaluation. Dr. Richard S. Lang, who heads the section of preventive medicine at the Cleveland Clinic, explained that while “the scans may not be for everyone,” they certainly “offer additional information to a patient’s profile” and, so long as the findings are managed properly, can be of great value—even if just as a baseline for future exams.

After the CTs and blood tests are completed, you can expect a very detailed and unrushed physical from a senior staffer instead of the usual Cliffs Notes version offered by your GP. Every aspect of your medical history will be checked—you will be asked to send copies of all available reports in advance—and any issues, aches, or pains considered. I then had a challenging cardiovascular stress test and gym session with senior exercise physiologist Chris Volgraf. A highly educated trainer and professional strength coach, he completely changed my perspective on my own workout regimen and showed me a series of warm-ups and exercises designed to make my gym time safer, more efficient, and more effective.

Lunch was followed by a vision and hearing test, a bone density and body composition scan, and a meeting with a nutritionist, who evaluated the three-day food log I had been asked to keep.

When all the tests were done, the biggest difference between a full day at one of the clinics and a quick routine maintenance

check became clear: A senior doctor sits down with you and reviews the results of every test in detail and their implications. Seeing rotating, 3-D, full-color computer images of your internal organs can be disquieting. Dr. David Fein, medical director and founder of the PLC, told me that one of the most effective tools in convincing patients to modify their unhealthy lifestyle is showing them their blocked arteries or the vascular fat wrapped around their vital organs in high-definition splendor. “You can point to it and say ‘That’s a picture of your heart attack, or your type 2 diabetes diagnosis in five years.’” Pushing the predictive envelope, the Duke Executive Health Program will soon offer a cutting-edge genomic DNA-based assessment that screens for certain genetic risks.

I left the PLC with a hefty binder, complete with test results and a disc containing copies of my scans, to give to my personal physician. In my opinion anyone who can afford it, or whose employer or insurer will pay, should immediately sign up for a visit to one of the top clinics and return at reasonable intervals. The Mayo Clinic quotes studies showing that companies can save as much as 20 percent in additional medical claims and 45 percent in extra sick days taken by executives who have regularly undergone thorough physicals. It’s unlikely you have ever gotten so complete and detailed a review of not just the results but also the meaning of routine medical tests, as well as specific and practical advice on diet and exercise. While affiliation with a hospital or a major medical clinic is obviously a plus, the most important thing a diagnostic center can do for you is get you in the door. So if traveling makes you less likely to go, pick a center nearby. ■

**What It Costs: Programs at the Top Clinics in the Country**

CLINIC	LOCATION	PROGRAM	APPROX. COST
<b>Center for Partnership Medicine at Northwestern Memorial Hospital</b> centerforpartnershipmedicine.com	Chicago, IL	1 day	\$3,000-\$6,000
<b>Cleveland Clinic</b> clevelandclinic.org; executivehealthprogram.com	Cleveland, OH; Weston, FL; Toronto; Canyon Ranch (AZ, MA)	1-3 days	from \$3,000
<b>Cooper Clinic</b> cooperaerobics.com/clinic	Dallas and McKinney, TX	1 day	\$1,800-\$4,000
<b>Duke Executive Health Program</b> dukeexehealth.org	Durham, NC	1 day	\$2,800
<b>Executive Health Program at Menlo Clinic (Stanford University)</b> execcmd.com	Menlo Park, CA	½ day	\$2,000-\$2,600
<b>Johns Hopkins Executive Health Program</b> hopkinsmedicine.org/gim/clinical/executive_health	Baltimore, MD	1 day	\$1,800-\$2,200
<b>Executive Health Program at Mayo Clinic</b> mayoclinic.org/executive-health	Rochester, MN; Scottsdale, AZ; Jacksonville, FL	1-2 days	\$1,500-\$6,000
<b>Princeton Longevity Center</b> theplc.net	Princeton, NJ	1 day	\$3,250
<b>UCLA Comprehensive Health Program</b> exehealth.ucla.edu	Los Angeles, CA	1 day	from \$2,400