

# Addressing Lifestyle Influence on Human Equilibrium in Clinical Practice

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Lifestyle and environmental characteristics influence human well-being, and the individual equilibrium is easily affected when one or more components of them, in considerable amounts, outweigh others, deteriorating their balance, finally leading to more or less clinical expressive disorders, in line with genetics and other medical conditions.

Human activity, if adjusted to demographic characteristics, in a comfortable setting offers enjoyment and motivation for a guaranteed existence; the daily program well-organized in a friendly atmosphere ensures a healthy life. Inadequate conduct in day-to-day work, even in a suitable setting, can disrupt one's functioning. It is essential to organize harmonized mental and physical activities to maintain equilibrium.

Young individuals are more enthusiastic, dynamic, and cheerful than seniors. They can control transitory intense physical and mental activity, but middle-aged people and seniors usually experience health deterioration in such conditions.

The evidence in clinical practice shows that extended and intense mental activities and sleep deprivation can be in front of heart disease for people in four or five decades. More intellectual and emotional engagement in daily work for a prolonged period leads to sleep schedule disruption. The body's nervous system cannot adequately recover from sleep deprivation, resulting in accumulating fatigue. Unbalanced fatigue determines the nervous cells' inefficiency in controlling bodily function, and chaotic heart activity can follow sooner or later in connection with adrenergic pathway activation. Therefore an unhealthy lifestyle can negatively impact mental and heart function, so informative programs are needed.

In the digital age, technological advancement facilitates fast disorders management.

An acute episode of heart disease imposes laboratory testing and specific investigations. Typically, the family physician's clinic may not have all the necessary tools for a precise medical diagnosis, as specialized departments can do it in a public or private hospital. Their referrals to specific medical units ensure the best management of illnesses, and cardiology is at the top of necessity. A cardiologist is best equipped and finalizes an accurate diagnosis and treatment, while a family doctor can provide more information about the origin of heart disorders.

The family physician accumulates more info about the patient's lifestyle since their longitudinal data are accounted for. Business continuity ensures endless patient observation, motivation, and the effectiveness of corrective measures applied when necessary. The cooperation of a family doctor with colleagues from other medical specialties is imperative for the sake of public health. Instant communications of interest for the patient and the medical team, discoveries of new drugs, and various alternative therapies can all make the patient's recovery more straightforward and accessible in this digital world.

The person-centred approach offers another dimension for understanding and applying the knowledge in practice; a deep look at the origins of the clinical manifestation of the illnesses and utilizing advanced technologies to address them enables a short revitalization. In a clinical case analysis, possible cumulative internal and external risk factors must be considered: their magnitude, interdependence, time action, and individual vulnerability - to predict their adverse effects on people's equilibrium.

Research data from the Hospital and the Primary Care Clinic supplies the gaps in the disease approach. Their collaborative work, rapid communication, and the use of a new AI algorithm in handling data lead to healthcare betterment, increase patient enjoyment, life quality, and expectancy, and offer a prosperous personal, professional, and social life in a world where time is our precious gift.