



PHILIPPINE COLLEGE OF LIFESTYLE MEDICINE

Secretariat:
No. 26 Huervana St., Lapaz, Iloilo
City, 5000
Email: info@pclm-inc.org
Website: www.pclm-inc.org

OFFICERS: 2022-2025

President

Mechelle Acero Palma, MD

Vice President

Bibly Macaya, MD

Secretary

Bysshe Fernan, MD

Asso. Secretary

Manuel Gayoles Jr., MD

Treasurer

Hazel De Los Reyes, MD

Asso. Treasurer

Elizabeth Ellaga, MD

Board Members:

Linda Varona, MD

Jan Paolo Dipasupil, MD

Ethel Vital Cornes, MD

MISSION

The Philippine College of Lifestyle Medicine serves its members by advancing the field of lifestyle medicine, promoting excellence in clinical practice, and advocating on behalf of medical and public policy issues related to the practice and promotion of lifestyle medicine.

The PCLM is an Affiliate Specialty Society of the Philippine Medical Association under the division of the Philippine Academy of Family Physicians

The PCLM is an accredited society of the Lifestyle Medicine Global Alliance (LMGA)

POSITION PAPER OF THE PHILIPPINE COLLEGE OF LIFESTYLE MEDICINE (PCLM) ETHICS COMMITTEE ON THE CIRCULATING LETTER OF COMPLAINT — FROM ANONYMOUS MEMBERS

March 18, 2024

Whereas, the PCLM ethics committee was provided with a copy of the circulating letter of complaint containing serious allegations against the PCLM leadership, particularly the President.

Whereas, a memorandum has been sent by the PCLM Ethics and Membership Committees to certain members who have been identified as engaging in controversial or illegal lifestyle medicine practices and publicity. The committees received responses from one member who redirected the issues to Dr. Mechelle Acero Palma, the President of the PCLM pertaining to the practice of Complimentary medicine. The same concerns align with the accusations in the circulating letter of complaint. Lifestyle Medicine (LM) practitioners can professionally engage in other practice modalities in which they have received training, provided that these modalities are clearly distinguished from lifestyle medicine and not promoted as such to attract patients. Moreover, Ornish and colleagues have demonstrated the efficacy of lifestyle medicine in reversing cancer, particularly in early-stage prostate cancer. Nevertheless, it is imperative for all LM practitioners to possess expertise in the utilization of "remission" and "reversal" terminologies, which should be grounded in the established parameters set in LM practice. Furthermore, the utilization of dietary supplements and herbal remedies as the primary intervention for these individuals resulting in extremely expensive "protocol" should not define a lifestyle medicine practice. In addition to receiving referrals or co-managing patients, LM practitioners are also required to establish professional alliances with other medical specialists. Conventional approaches, including medication, vaccination, dialysis, chemotherapy, radiation, and surgery, continue to be the primary management adjunct to the lifestyle interventions. It is imperative for LM practitioners to possess a comprehensive understanding of these modalities and empower patients to make informed decisions regarding their treatment options. It is important to avoid using counseling techniques that may cause patients to doubt the competence of other doctors, such as suggesting that patients should have saved their organ from operation if they had visited the lifestyle medicine specialist earlier – resulting in prejudice and resistance to refer patients to LM specialists. These are the concerns raised to some PCLM pioneering members and are currently being addressed by the ethics and membership committees.

Whereas the Philippine Organization of Lifestyle Medicine (POLM) Inc. was organized in 2015 and officially registered in 2018. There was a failed attempt to register the organization as Philippine College of Lifestyle Medicine under the Securities and Exchange Commission (SEC). Additional issues and liabilities arose with other legal documents that were improperly processed, leading to conflicting names in the BIR and business permits. The POLM was endorsed to the new set of officers headed by Dr. Palma in the last quarter of 2019 with the above-mentioned legal challenges. With the hope of acquiring accreditation under the Philippine Academy of Family Physicians as an Affiliate Medical Specialty, there was a pressing need to have a clear legal personality for lifestyle medicine practitioners, hence, Dr. Palma re-organized the society and registered it as the Philippine College of Lifestyle Medicine (PCLM) Inc. and started the official listing of its members.

Whereas, the PCLM had no financial resources or a physical office when it started. The unliquidated funds from the POLM leadership for the years 2019–2020 remained unresolved, and the PCLM was empty-handed with outstanding payables from the POLM's previous operations. As the PCLM sought accreditation with the PAFP/PMA in 2019, Dr. Palma's affiliation with Remnant Institute Inc. (RII) provided the needed financial, physical, and human resources for the PCLM. The RII has financially sustained the operation of PCLM until it became capable of paying for its operational expenses. It was only in Dr. Palma's term that PCLM had its own bank account. And the RII has also provided the most needed online payment portal for the PCLM members, as its PayPal account was permanently limited and cannot be used. Due to the conflicting legal documents of the POLM, PCLM cannot move the funds collected through the PayPal portal, resulting in financial losses. Conversely, the RII, which is an accredited training provider for several government agencies, also provided resources to the PCLM through its existing training programs. Culinary medicine is one of the RII's programs implemented as part of the Nutrition-Sensitive Agriculture, and Wellness program that was offered by the PCLM as a continuing medical education (CME) in compliance with one of the requisites for PAFP/PMA accreditation. It has also provided an external start-up revenue source for the PCLM, as it receives shared revenue for every registration coming from its members. There are also many registrants who are initially interested in culinary medicine and were eventually motivated to also complete the PCLM's lifestyle medicine training and certification. The RII has also linked the PCLM to government agencies where collaborations in the implementation of its advocacies were established, hence, the PCLM had the pecuniary benefit over the RII's resources, facility, and training programs.



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Whereas, the PCLM has been accrediting LM centers where its members can be immersed in compliance with the required in-person exposure for its trainees. The Lifestyle Medicine Solutions (LMS) Co. is the operator of the Lifestyle Medicine Digital Platform and Project Blue Zone Philippines, established in 2016 as Take To Give Inc. serving several Asian countries. The LMS Co. provided an immersion program for PCLM trainees and generated added revenue for PCLM from its member subscriptions. More importantly, the PCLM members are now able to provide free digital LM assessments and a free 2-week LM program to all their patients using the LMS Co. platform. This functionality provided LM practitioners the start-up default guide in practicing lifestyle medicine, which has been a challenge to the past trainees who didn't had exposure to LM practice. LMS Co. also assisted the PCLM in fulfilling its mission to make lifestyle medicine available to the public, thereby removing the stigma that only the elite and rich can afford a lifestyle medicine program—a result of the extremely expensive lifestyle programs offered by some LM practitioners.

Whereas, the PCLM has established its credentialing requirements for Fellows, including Honorary Fellows and Clinical Fellows. The complaint about causing divisiveness by having these credentialing categories has no sensible basis. Based on the required credentials and scholarly and organizational contributions, Dr. Mechelle Acero Palma eventually qualified for Clinical Fellow certification, while Dr. Johann Kim Manez maintained his Honorary Fellow certification. The PCLM also awarded the same credentials to other qualified colleagues. Moreover, the PCLM has also collaborated with several training institutions, including LMS Co., Adventist Medical Center, and Adventist University of the Philippines, in the conduct of training and credentialing for Allied Health Professionals and Health Coaches, which is a limitation in the allowed function of the PCLM where only physicians should be included in the credentialing and membership.

Whereas the personnel, and the new founding PCLM I Inc. board members were based in Western Visayas when the organization was established, and the RII initially financed the PCLM, hence, the physical office was established in Iloilo City in 2020. Other PCLM secretariats are working from home, and most of the transactions processed within PCLM are done online. However, the decision to operate a PCLM office within the PAFP building in Manila was proposed in 2022 and approved in the second quarter of 2023 with pending contract compliance with the PAFP. Hence, the concern about having an extension office at the NCR has been on the table.

Whereas, Dr. Mechelle Palma's background in health administration, competency-based training, curriculum development, and training implementation, made her the founding director of lifestyle medicine education in Asia. As one of the pioneering certified LM specialists under the International Board of Lifestyle Medicine with LM and culinary medicine training immersion experience, she was chosen to represent the international LM societies in the development of LM practice and competencies that's applied all over the world. Dr. Palma was also requested to be part of the international team who crafted the competencies for LM intensivists and was furthermore asked to assist in the development of the training framework for clinical fellowship in Preventive and Lifestyle Medicine at the UP-PGH. She also initiated the LM National Training Initiative (LM-NTI) for primary care providers under the DOH and LGU and was able to facilitate the approval of lifestyle medicine training for Barangay Health Workers (BHWs) during the Duterte administration. Dr. Palma, together with the PCLM education committee, is also working on the transition of CME-based LM training to LM residency training. These are some of the important contributions and ongoing endeavors of Dr. Palma and her team that brought PCLM and its members to a relevant position in the medical industry and other government-related programs, in both local and international levels; hence, her appearances on multiple podiums showed the inevitable success of the PCLM. The concerns of some members, on why the PCLM president is the only one representing the society in different events are a clear professional malice, as any president of medical societies will have the same official function to fulfill. In addition, other PCLM officers and board members have been officially representing the PCLM in several events and functions.

Whereas, the PCLM board members and ethics committee have been dealing with the misconduct and controversial practice of some members who have been representing the society. There are members who moved against the implemented recertification process applied to LM practitioners who were not able to take the National LM Board Examination – in compliance with the required LM practice validation. There are also PCLM members who have been evoking conflict by spreading malicious information, exaggerated complaints, and arguments, thereby convincing more members to go against the PCLM administration. These movement caused disintegration, and loss of interest among trainees, diplomate members, and institutions that the PCLM have been working with.



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RESOLVED, that through the fact-finding of the ethics committee, the grave accusations against the PCLM president were published false statement, and a written defamation. The intention of circulating the said letter spread among PCLM members, board members, PAFP, PMA, and PRC is a clear movement to cause divisiveness and threat to the society that should be dealt with by the PCLM ethics committee with the assistance that will be solicited from the PAFP, PMA, and PRC.

RESOLVED further that since the inception of the PCLM Inc., and now a fast-growing medical specialty, the PCLM have been receiving pecuniary benefit from Dr. Mechelle Palma's resources, affiliations, expertise, and time to advance lifestyle medicine in medical education, primary care practice, community-based advocacies, and the health care system framework. Through her collaborative efforts with the PCLM board members and standing committees, national and international alliances, and bonafide members, the dissenting movement of few PCLM concerned members will not impede the progress its achieving that will continually benefit all its members, and more importantly, the patients and communities it serves.



Leonard Baraquia, MD

Chair, PCLM Ethics Committee



Mansueta Sabellina, MD

Secretary, PCLM Ethics Committee



Bienvenido Tamano, MD

Co-Chair, PCLM Ethics Committee



Menchu Diana, MD

Member, PCLM Ethics Committee



Bysshe Fernan, MD

PCLM Executive Secretary