John Clymer: Now for our closing segment, I am excited to introduce Dr. Stephanie Haridopolos, who, as I said earlier, is the recently appointed Chief of Staff and Senior Advisor in the Office of the United States Surgeon General. We are going to have a conversation about how the Trump administration and the Making America Healthy Again initiative could help raise the priority on hypertension prevention and management. Dr. Haridopolos is a family physician with noteworthy leadership in expanding access to healthcare and improving population health in her home state of Florida. I can actually spend all of our remaining time telling you about her impressive background, but instead I will refer you to her bio sketch and the program book so that we can get started with our conversation. Dr. Haridopolos, welcome and thank you for being here today.

S. Haridopolos: Thank you, John, for having me. It is a true honor to be invited to speak today at the National Forum. It is so important what you do. I thank all the previous speakers for their contributions to healthcare and society. On a personal note, I know Dr. Philip from Florida, being the former surgeon general and working on projects with her. She is just an incredible physician and I am so glad to see her work continuing. She was the Woman of the Year for Florida and Public Health in 2016. I followed really big shoes in 2024 when I received the same award, which was such an honor.

John Clymer: Absolutely. We are honored and thrilled that Dr. Philip serves on the National Forum's executive committee. I want to go to what you just mentioned, Stephanie. The University of South Florida School of Public Health did recognize you as Florida's 2024 Outstanding Woman in Public Health. Congratulations.

S. Haridopolos: Thank you.

John Clymer: They highlighted your leadership at Florida Healthy Kids and your unwavering commitment to securing better health outcomes for future generations. That connects directly to what we just heard several speakers emphasize a short time ago, that being the importance of monitoring and managing blood pressure early in life to set children, adolescents, and young adults on a path to lifelong health. With your background in family medicine and your focus on Healthy Kids in Florida, do you agree with that approach? Should we start measuring blood pressure earlier and taking steps where appropriate to help kids and their families manage blood pressure?

S. Haridopolos: Thank you for that question. I was chairman of the board for Florida Healthy Kids Corporation for six and a half years and my goal was to help increase access to health care for children in Florida up to the end of age 18. We had an idea to increase the eligibility for the CHIP program from 200 to 300 percent of federal poverty level. It was four years of advocacy, and it would equate to about 80,000 children getting affordable health care in the state of Florida with the CHIP program bipartisan, bicameral, and signed into law by Governor DeSantis a couple years ago. Super proud of that effort in Florida.

I am passionate about children having access to healthcare. I actually was born with a hole in my heart. I had atrial septal defect and I had open heart surgery at Columbia Presbyterian in 1976 when I was four. If I had not had access to healthcare, I might not be here today. That I think is what drives my passion. I started life as a patient and I have that empathy for my patients. In fact, I created my North Star at age four and said that is what I was going to do with my life and never changed from my trajectory. I always come with the sight of being a patient and having that empathy and wanting to make sure that all of my patients for the over two decades I was on the front line seeing generations of families in my county in Florida had that access to care.

But to your specific point about screening, early and often, I think. It is recommended that at age three at the annual wellness exam we should start screening for blood pressure in children. It depends on the chart, where they are with sex, age and height, if they met criteria. Of course, we would start with lifestyle modifications. I know I am speaking to the choir here. Everyone talks about that first. Of course, we recognize it, and then we try to reverse it. The last doctor that just spoke, when she said 80 percent are modifiable hypertension, she is so right.

Here we are. We are talking about not only diagnosing early, but also then reversing the trajectory, making sure that we are educating. My motto always was empowering patients with knowledge to live a healthy lifestyle as a primary care preventative medicine. I wanted to be proactive. I did not want to just treat disease when I found it. As clinicians we are trained to do that. But we want to prevent it and educate people on how to live the healthy lifestyle. Now here I am in this position having the megaphone and the bully pulpit to be able to do that, which I am super excited about.

John Clymer: That is great. Talk about that for a moment. How does "early and often," how does your motto translate to Making America Healthy Again?

S. Haridopolos: That is great. I do not know if you saw the MAHA executive order that was released February 13th by President Trump wanting to put this front and center. He understands that our country, unfortunately, despite all of our efforts, our life expectancy is not as long as compared to other developed countries. It is at 77 compared to 82. Our obesity rates are obviously way too high. Overweight and obesity for adults, 75 percent, and children at 40 percent. We have 70 percent of our children are not qualifying for military.

When you follow the executive order, I think that this is a very bold initiative to take a fresh look at what can we do differently with educating about diet, nutrition, cleaning up our food system in a way where not only we have to make sure it is accessible but that maybe we do not need to have all the ultra-processed foods that exist in our food system in this country compared to other countries. I was very much a part of the MAHA Moms in the executive office building on February 13th. Secretary Kennedy in the Indian Treaty room wanted to hear from moms across the country and what they are concerned about. I am a mother of three. All three of my kids are grown and on wonderful paths in life and I am super proud of that. That is just such an honor to be a part of that.

The April 22nd petroleum-based dyes, synthetic dyes coming out of our food system. What is happening where the kids are eating products that mostly are processed foods that could be driving up the salt intake, as well as the possible toxins and blood pressure because it is feeding into the obesity epidemic. Yes, I know not everybody with obesity has high blood pressure, but a good proportion do. So, we need to look at that.

We have a lot of population that has prediabetes and diabetes. We are eating wrong and there are some initiatives that are going to come out that you are going to see. A revitalization of the President's youth fitness program. You are going to see the President's Council on Sports Fitness and Nutrition to making healthy America again. I do not know if you guys realize, but this month in May is the National Physical Fitness and Sports Nutrition Month. Over the next 10 years, it is going to be the decade of sports. Getting kids excited about America being home to so many great sporting events, having role models that are going to be active, and encouraging kids to get off of their cell phones and screen time and getting

them to move more and getting them off of playing the games and going outside and enjoying the fresh air and being active and eating healthy. I cannot stress that enough and that is all going to be encompassed in this MAHA movement.

Coming up, the commission will be releasing a report, the first 100 days, May 24th, about identifying a lot of the issues that are driving the chronic diseases. Then, at the 180th mark in August, you are going to see the strategic plan of addressing those through the commission. I anxiously await seeing those reports and I am sure all of you are too.

John Clymer: We are indeed eager to see those reports. Stephanie, even though we know the keys to preventing and managing hypertension – you just addressed several of them: eating well, staying active, limiting alcohol, living smoke-free, reducing stress, and getting evidence-based medical treatment when needed – fewer than half of US adults with hypertension have it under control. That was a great rundown of strategies to address those things but I wonder how will MAHA make hypertension prevention and management a bigger priority for the United States?

S. Haridopolos: I think it all falls in the lap of MAHA. When you modify the risk factors that we are discussing, whether it be the way we are eating, not exercising as much, the diabetes rate, the cholesterol rate hopefully, the blood pressure rate will come down if we really make it a priority for Americans to really hear and listen to us. I heard what the previous speakers were talking about with pictures – Frank Luntz especially, he is a brilliant man that I respect greatly, and he is so brave to talk about his past his comorbidities and what he went through. I think it is very encouraging for people to see that.

John Clymer: Yeah, and it is an ongoing struggle.

S. Haridopolos: Well, it is ongoing, yes. Of course.

John Clymer: Yeah.

S. Haridopolos: We do need to warn America and with pictures, and whether it be with Surgeon General awareness campaigns with calls to action, with advisories, once our Surgeon General does get onboard, you will see a lot of that getting pumped out of our office. Having instead of just text rotating pictorial messages that are telling a story and story banking and showing a picture says a thousand words. I think that that is going to be so key to showing –

uncovering the silent killer – we do not like saying that, but it is true. A lot of people do not know they have blood pressure yet. Half of adults have it. Talking about it, making the conversation top and center so people understand they need to check it.

Going forward, we have continuous blood glucose level monitors that more and more people are actually getting on board with so they can teach themselves how to eat. There might be some tech companies in the future that will have continuous blood pressure monitor devices that can accurately and with validity have continuous blood pressure. That is a little bit more technologically savvy that medical professionals can look at and guide patients. I want people to really change their lifestyle first. I understand medicine is sometimes necessary, but it was always my last resort. I know that all of you would like to see that people change their trajectory of their lives with eating healthy and exercising and understanding what is happening to their bodies.

Of course, medication sometimes is necessary. But a lot of people are being maybe overmedicated and we need to take a giant step back with a different perspective and just say "What can we do better with common sense initiatives?" Where will that be? We have some iconic figures that are here that can really resonate that message out at HHS. I hope with the future we are going to make some great improvements in life expectancy as well as decreasing the incidence and prevalence of hypertension.

John Clymer: We certainly look forward to joining with you to turn the American life expectancy disadvantage into the American life expectancy advantage.

S. Haridopolos: I am particularly concerned about the vaping epidemic. We have done so great as America with tobacco abuse and we know that that is a modifiable risk factor for hypertension, cardiovascular disease, and stroke. At some point we are going to have to talk more about the younger adults and adolescents that are still partaking in vaping. We have improved since 2019. The numbers, it has come down. We need to keep on that trajectory. We do not want to lose hold of that. I think that there are still millions that are doing it, and who knows really the chemicals that are in there? I think that if we are going to talk about it, when we talk about tobacco I think we need to add that in and really increase the awareness of dangers so the younger generation does not think that it is a safer alternative. Not that I am saying go back to smoking, but with the chemicals and then the nicotine combined we know that it can increase heart rate and blood pressure. If you could also

continue that conversation. I know there is an association and I know that it has not been long enough for causation and there needs to be more longitudinal studies going forward with the 20 years and then of course and analysis of the data, but that that is something that is very important to me that I started when I was in the tobacco advisory council for the Florida Department of Health back a few years ago and I would like to carry that torch here on the national level.

John Clymer: Dr. Haridopolos, you see the smile on my face. I am sure if everyone's camera was on, you would see lots of smiles facing your way. That is all very encouraging news. We heard it here. Thank you very much for sharing that perspective. I think about the progress you just talked about that we have made with smoking cessation, tobacco cessation in the United States. It is such a great powerful illustration of how working at the bottom of the pyramid, the public health pyramid has so much power to effect change that does improve health and well-being for large numbers of people. I love your references to that.

Final question for you, Dr. Haridopolos. Hypertension is the top risk factor for stroke, heart disease, and heart failure. That is what is bringing us together today. But it is certainly not the only one. We know high cholesterol, diabetes, obesity, and smoking also play big roles in driving premature death and disability. How will the MAHA initiative step up America's efforts to prevent and manage those critical health risks?

S. Haridopolos: I think I just mentioned one, but I think they all are in lockstep. I really do believe that we have an opportunity this year to rewrite dietary guidelines that will be coming out in partnership with USDA every five years. That is due by the end of this year statutorily, so you are going to see HHS have a lead on that and that is super exciting that it is happening around this time. Not only adjusting dietary guidelines, but also reinvigorating these presidential youth fitness program, as well as the Council on Sports Fitness and Nutrition.

With that, I think that those are going to be very instrumental on helping people as they exercise more, as they eat healthier, lowering cholesterol, lowering blood pressure and avoiding diabetes. I think obesity might stem from a lot of carbohydrates that we are eating, and when you diminish carbohydrates, then perhaps you can also help lower weight, which then can lower your diabetes risk and then cholesterol and hypertension. It kind of all folds in together. I know they are all individual and not everybody has all of them, but

some people do. Coming up with the root causes of chronic illness and trying to reverse that and how we can do better in America, I think you are going to see come out of this office over the next six months to a year.

John Clymer: Stephanie, I love your emphasis on root causes and pushing attention and action and priorities upstream. That is terrific. Dr. Stephanie Haridopolos, first, congratulations on your new gig in the Department of Health and Human Services and MAHA leadership. Thank you for your service and thank you for joining this virtual convening today.

S. Haridopolos: Thank you. I really appreciate the invitation and I want to continue the conversation with you and your forum. I know that your work is so vital and important to the health of America and I appreciate all your hard work for all these many years before I of course got on board in what you are doing. Thank you again. We will be in touch, I am sure, as the months unfold.

John Clymer: Right back at you. We look forward to continuing the conversation as well.

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