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Commentary

Actionable Health Investments for Longevity: Empowering Consumers to Shape the Healthcare Ecosystem

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This commentary explores the rise of proactive health management and its implications for consumer behavior, healthcare systems, and long-term health outcomes. It argues that personalized, preventive care—via digital tools, diagnostics, and supplementation—can be cost-effective when compared to routine discretionary spending. The manuscript highlights the role of consumer empowerment, biohacking, and digital health in challenging reactive medical models, especially within Europe's welfare-based systems. Drawing on research from systems biology, health economics, and lifestyle medicine, it calls for a cultural shift toward healthspan-oriented care. It also addresses barriers such as fragmented systems and low preventive literacy, and proposes future persona models as tools for innovation.

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Proactive health is no longer a niche concept reserved only for the privileged or the overly healthobsessed. It is becoming a structured and emerging field within medicine itself—gaining ground parallel to the rise of biohacking culture, digital health technologies, and growing consumer empowerment. In the vacuum left by increasingly overloaded, reactive healthcare systems, individuals begin to take health into their own hands. What once seemed fringe is now becoming mainstream. However, the infrastructure, pricing transparency, and coherence of the proactive care market remain fragmented and often opaque.

Still, a clear shift is underway. People are becoming more responsible for their health—not only because they want to—but because they must. The convergence of wearable data, personalized supplementation, and concierge digital services creates new ways of self-directed care. At the same time, the costs associated with these interventions are often overestimated or misunderstood. Many components of proactive health are already within reach for a wider population. The narrative that longevity testing, precision diagnostics, and health optimization strategies are exclusively "premium" becomes weaker when we compare their real costs to everyday lifestyle spending—such as vacations, entertainment, or even habitual consumption patterns.

This leads to the core hypothesis: **Proactive health investment is not fundamentally expensive; it is rather a question of perceived value, mindset, and reallocation of available resources.** The cost of advanced proactive health services may be similar to that of common discretionary expenses, such as leisure travel, suggesting potential affordability when viewed as a strategic investment. Once this comparison is made visible, the argument becomes tangible—what was once seen as elite medicine becomes a conscious, rational investment choice.

Moreover, the shift toward proactive care marks a turning point in the evolution of medicine. It challenges not only the financial assumptions but also the way we define care delivery. It moves away from disease reaction to health preservation. And it moves the center of responsibility from the institution to the individual. In this transition, numbers, context, and comparisons matter. They help to demystify the field, turning abstract "optimization" into concrete actions.

Ultimately, the future of healthcare will not be built only in hospitals—it will be built in homes, apps, and personal choices. This article argues that the affordability of proactive care is not a technical problem. It is a cultural and mental shift. And it starts with reframing what we consider worth investing in.

In the context of modern medicine and proactive health, it is essential to distinguish between several terms that are often used interchangeably but represent distinct dimensions of human aging and performance over time.

Lifespan

Lifespan refers to the total number of years a human being lives—from birth to death. It includes both the *average lifespan* (or life expectancy), which is a statistical measure across populations, and the *maximum lifespan*, which refers to the theoretical or observed biological ceiling of human life (currently estimated around 120 years). Lifespan is a quantitative metric and does not imply the quality of life experienced during that time.

Longevity

Longevity, while often used synonymously with lifespan, carries a broader connotation. It refers not

only to the length of life but also to the biological, behavioral, and technological factors that contribute to extended survival. In recent discourse, longevity implies the intentional pursuit of extended life through lifestyle optimization, preventive strategies, and medical interventions—often rooted in aging science, genomics, and systems biology.

Healthspan

Healthspan defines the period of life spent in a state of optimal health—free from chronic illness, significant physical or cognitive decline, or dependency. It is a qualitative metric that captures functional capacity, vitality, and independence. The clinical objective of increasing healthspan is to *compress morbidity*—delaying the onset of degenerative disease and reducing the years spent in illness, disability, or frailty toward the end of life.

Healthy Longevity

Healthy longevity integrates both concepts: it denotes a long life *and* a healthy life. It is the ideal endpoint of proactive medicine—extending not just survival, but high-functioning, disease-resistant years. This concept shifts the focus from simply "adding years to life" to "adding life to years," aligning with preventive strategies, personalized interventions, and the empowerment of individuals to manage their biological aging trajectories.

Modern proactive care—especially when delivered through digital platforms, personalized data, and continuous monitoring—aims primarily to enhance **healthspan**. However, by delaying or mitigating the drivers of chronic disease and functional loss, it contributes indirectly but meaningfully to **longevity** and **lifespan**. The convergence of these goals defines the emerging domain of **healthy longevity**, which now sits at the frontier of medicine, public health, and self-directed care.

Introduction

In recent years, the landscape of healthcare has witnessed a profound shift towards proactive care, prevention, and the pursuit of an extended healthspan. The surge in publications dedicated to these topics mirrors the growing awareness and demand for health optimization. At the same time, the rise of biohacking services—ranging from educational resources to actionable interventions—has been largely driven by influencers and non-physician advocates. Yet, traditional healthcare systems remain ill-equipped to meet the needs of health-conscious, digitally savvy consumers, often neglecting prevention and holistic well-being^[1]. The issues that these systems have to deal with include increasing costs, lack of

dedicated staff, demographic changes, and the unwillingness for change by the stakeholders, combined with the policymakers' inability to make decisions towards a transformation.

This gap leaves those experiencing early, subtle symptoms without adequate support, while physicians grapple with a lack of structured training in proactive health management.

Amid this fragmented and opaque market, consumer demand is reshaping the landscape, spurring the development of matching platforms and pushing insurance and statutory systems to integrate preventive measures^[2]. To truly benefit from this paradigm shift, consumers must grasp the actionable dimension of their healthspan—understanding what practical, low-cost, and proven steps they can take today to enhance their well-being and extend their chronic disease-free years. As the movement toward proactive care gains momentum, the question remains: how can individuals harness this evolving ecosystem to maximize their health potential?^[3]

Exponential Growth in Proactive Care and Prevention Research

Over the past two decades, scientific research on proactive care, prevention, and health span extension has surged exponentially. This growth is driven by an increasing recognition of the importance of preventing chronic diseases before they manifest, rather than merely managing symptoms once they occur. According to recent bibliometric analyses, publications on health span extension alone have increased by more than 300% over the last decade, reflecting a heightened interest in understanding the biological mechanisms of aging and the interventions that can delay its onset.

The growing body of literature spans diverse fields, including genomics, epigenetics, nutrition science, physical activity, and mental health. Researchers are investigating how lifestyle interventions, such as personalized nutrition, exercise regimens, sleep optimization, and stress management, can positively influence gene expression and metabolic pathways.



Search terms "healthy aging," "healthspan," and "healthy longevity" in the title or keywords of journal papers have grown exponentially since 2000

In recent years, there has been growing interest in **advanced therapeutics** that aim not just to treat disease but to intervene in the underlying biological processes of aging and degeneration. Agents such as **senolytics** (which selectively eliminate senescent, or "zombie," cells that accumulate with age and contribute to tissue dysfunction), **NAD⁺ boosters** (which aim to restore levels of nicotinamide adenine dinucleotide, a molecule essential for cellular energy and DNA repair), and **stem cell therapies** (which seek to regenerate or repair damaged tissues) exemplify this new frontier.

These interventions reflect a **shift from symptom-based medicine to systems biology**, where the focus is on understanding and modifying the interconnected networks that regulate aging, inflammation, mitochondrial function, and tissue regeneration. Rather than targeting isolated diseases, this approach views the body as a dynamic, integrated system—seeking to preserve resilience, delay biological aging, and extend functional capacity across the lifespan.

In essence, this signals a move toward *proactive, root-cause-driven healthcare*—one that goes beyond managing illness to actively sustaining and enhancing human vitality at the cellular and systemic levels. [4][5][6]

This surge in research is not merely academic; it is also influencing public health policies and clinical practices worldwide. For example, the World Health Organization (WHO) and other public health bodies

are increasingly emphasizing the importance of preventive measures in their guidelines^[7]. The focus is on reducing the global burden of chronic diseases such as cardiovascular disease, diabetes, and neurodegenerative conditions, which collectively account for over 70% of worldwide mortality. ^[8]

Transitioning from a reactive to a proactive healthcare mindset requires a cultural shift. It challenges the traditional belief that the healthcare system will always provide care and emphasizes personal responsibility in health management. ^[1]

This shift is driven by several factors:

- **Rising healthcare costs:** The growing burden of chronic diseases increases healthcare expenses, making prevention more cost-effective.
- **Technological advancements:** Digital health tools and personalized preventive strategies make proactive health management more accessible and affordable.
- **Changing consumer behavior**: Today's health consumers seek empowerment, autonomy, and personalized solutions, moving away from the traditional patient role.

The Rise of Biohacking and Consumer Empowerment

Parallel to the academic discourse on prevention and health span extension, the past decade has witnessed a dramatic rise in biohacking services. These services range from educational platforms providing health literacy to actionable interventions, such as personalized nutrition plans, wearable health devices, and cognitive enhancement techniques. Influencers, wellness coaches, and non-physician experts have played a pivotal role in popularizing biohacking, leveraging digital platforms to reach a global audience. ^[1]

Biohacking, once a niche community of self-experimenters, has evolved into a mainstream movement that empowers consumers to take control of their health. The rise of social media platforms, podcasts, and digital content creators has democratized access to information, enabling individuals to experiment with lifestyle interventions and track their health metrics. From intermittent fasting and nootropics to advanced wearable devices measuring heart rate variability (HRV) and sleep patterns, consumers are increasingly equipped to make data-driven decisions about their health. ^[9]

The appeal of biohacking lies in its promise of personalized, actionable health strategies. In contrast to conventional healthcare, which often follows a one-size-fits-all approach, biohacking emphasizes individual variability and empowers consumers to optimize their physiology based on real-time data.

This trend is particularly pronounced among digitally savvy millennials and Generation Z consumers, who demand more transparency, customization, and agency in their healthcare choices.

Gaps in the Traditional Healthcare System

Despite the growing consumer demand for proactive care and prevention, the conventional healthcare system cannot address these needs and needed future directions. One of the fundamental challenges is the reactive nature of traditional medicine, which focuses on diagnosing and treating diseases after they manifest, rather than preventing them in the first place. This approach is largely influenced by medical education systems that prioritize pathology and pharmacology, with limited emphasis on preventive care and holistic health.

Furthermore, conventional medicine often struggles to accommodate the needs of health-aware consumers who present with early, non-specific symptoms. These individuals, who seek to optimize their health rather than merely treat disease, frequently find themselves dismissed, not understood, or misunderstood by healthcare providers. The lack of 1) structured education during initial medical education, and 2) subsequent training for physicians on proactive care, health optimization, and holistic health further exacerbates this issue. ^[9]

There is little or no scientific evidence on what effect such an approach would have on overall population health, mainly because this would require longitudinal data acquisition over a decade, but getting individuals more aligned with their own health is undoubtedly beneficial.

In addition, traditional healthcare systems are burdened by bureaucratic complexities, fragmented care pathways, and a lack of interoperability between digital health tools and electronic medical records. These challenges hinder the integration of innovative health solutions, such as personalized nutrition, digital therapeutics, and wearable health technologies.

Fragmentation and Opacity in the Proactive Health Market

The market for proactive care and biohacking services is highly fragmented and opaque, presenting significant challenges for consumers seeking reliable and evidence-based interventions. With a plethora of health optimization products and services available, ranging from dietary supplements and genetic testing to cognitive enhancement tools, navigating this landscape can be overwhelming.

A key challenge is the lack of standardized regulations and certifications, which makes it difficult for consumers to distinguish between scientifically validated solutions and pseudoscientific claims. This problem is compounded by the influence of digital marketing and social media, where influencers often promote products without adequate scientific backing. The result is a highly competitive yet confusing market where consumers struggle to make informed decisions.

However, the increasing consumer demand for proactive health solutions is also driving innovation. In response to market fragmentation, new platforms are emerging to bridge the gap between consumers and health experts. These platforms utilize artificial intelligence (AI) and machine learning to provide personalized health recommendations and facilitate access to vetted practitioners. Additionally, the growing trend of digital health marketplaces is enhancing transparency by offering user reviews, expert insights, and evidence-based evaluations of health products and services. ^[10]

The Role of Consumer Demand in Shaping Healthcare

Consumer demand is playing a pivotal role in reshaping the healthcare landscape. As health-aware and digitally savvy consumers seek proactive and personalized health solutions, they are driving the adoption of prevention-oriented services across various sectors, including insurance and statutory healthcare systems.

Insurance companies are increasingly recognizing the cost-effectiveness of preventive care, as early intervention can significantly reduce the financial burden of chronic disease management. This has led to the integration of wellness programs, digital health tools, and lifestyle coaching into insurance plans. Similarly, statutory health systems are gradually embracing preventive measures, although progress is slower due to regulatory and institutional constraints. ^[10]

The influence of consumer demand is also evident in the rise of health tech startups and digital health platforms. These companies are leveraging advanced technologies, such as AI-driven diagnostics, telemedicine, and digital therapeutics, to provide convenient and personalized health solutions. The digital health market, estimated to be worth over \$250 billion by 2025, is set to grow further as consumers continue to prioritize proactive health management.

Health Responsibility

Over time, especially in Western and Central Europe, the consumer or patient expects the system to guide him through his healthcare journey and has an all-inclusive health mentality. What few understand is that our current system was born during the Industrial Revolution and aimed at keeping workers at work; not necessarily was the focus on ensuring a good health-related quality of life for everyone, so the reactive approach emerged, trying to fix things fast in order to keep productivity up. Indirectly, the consumer developed the feeling that the system has an interest in keeping him healthy. The motivation, though, is not something the consumer thought about. We are now entering a new era. Information and automation are on the rise; yes, in many cases, abundance and a long healthy life are surprising the system because the costs and productivity are divergent in older age, supported by a passive consumer mindset.

Healthcare evolution from the consumer's perspective: Rethinking Health Responsibility in Europe

In Western and Central Europe, healthcare culture has long been shaped by a passive consumer mindset. Rooted in the post-industrial welfare model, individuals expect the system to manage health on their behalf—a legacy of a system historically built not to optimize well-being, but to restore productivity ^[11]. This reactive orientation, still dominant today, has produced healthcare structures centred on symptom treatment rather than long-term prevention or holistic wellness ^[12].

Throughout the 20th century, European welfare states developed comprehensive, tax-funded healthcare systems. While this guaranteed broad access, it also fostered a sense of externalized responsibility— where medical professionals became gatekeepers and individuals disengaged from their own health management ^[13]. Preventive care remained marginal, both in service design and funding allocation, reinforcing a biomedical model that prioritized disease management over risk reduction.

This dependency was further entrenched by systemic fragmentation. Specialists operate in silos, and treatment pathways often neglect the social, behavioural, and environmental determinants of health. For instance, chronic conditions like hypertension or metabolic syndrome are often pharmacologically controlled without addressing root causes such as poor diet, inactivity, or stress ^[14]. As populations age,

this model proves economically unsustainable, driving up healthcare costs while failing to prevent disease onset.

However, a cultural and technological shift is underway. The digital health era has empowered individuals with access to real-time biometrics, preventive strategies, and health optimization knowledge. Wearables, algorithmic diagnostics, and AI-driven health platforms now support a new kind of health engagement—one that emphasizes agency, self-monitoring, and personalization ^[2].

The rise of **biohacking** exemplifies this change. Though sometimes outside traditional medical oversight, the movement reflects a growing demand for longevity-focused, self-directed care—from personalized nutrition to genomic testing. It challenges the healthcare status quo by prioritizing **health span** over reactive treatment and reflects a broader reorientation toward lifestyle-driven prevention.

In parallel, digital platforms are emerging to connect consumers with individualized health services bridging the gap between wellness, diagnostics, and coaching. Insurance models are beginning to respond by offering incentives for preventive behaviors and health data integration. Still, this evolution remains uneven, and cultural inertia persists.

To accelerate the transition, both the system and society must redefine health as a shared responsibility. Empowering consumers requires more than access to data—it demands **health literacy, behavioral frameworks, and supportive infrastructure**. Physicians, too, must shift roles—from authoritative experts to facilitators of proactive health ownership, equipped with skills in digital health, prevention, and patient coaching.

Ultimately, the future of healthcare lies in balancing public provision with personal accountability. A sustainable, resilient system will emerge only when individuals are equipped—and expected—to actively manage their health, not merely consume care.

The Case for Proactive Health Investments

To evaluate the affordability of proactive healthcare, it is essential to consider it within the framework of typical household spending behaviour. A direct comparison with established monthly expenditures offers a more grounded and relatable perspective. While healthcare is often viewed as a domain of insurance coverage or acute necessity, discretionary income is consistently allocated toward categories that enhance quality of life—such as leisure, dining, or personal goods. Understanding where and how

households prioritize their budgets allows for a reframing of proactive health not as an exclusive service, but as a rational alternative investment—on par with other lifestyle-enhancing expenditures.

The largest portion of household expenses was allocated to **housing**, **energy**, **and maintenance costs**, which accounted for €1,025 (36.0%) of total expenditures. This highlights the significant financial burden of living expenses in Germany ^[15].

Other major spending categories included $\frac{[15]}{}$:

- Food, beverages, and tobacco: €417 (14.6%)
- **Transport**: €347 (12.2%)
- Recreation, sport, and culture: €245 (8.6%)
- Interior decoration, household appliances, and articles: €170 (6.0%)
- Restaurants and hotels: €177 (6.2%)
- Clothing and footwear: €103 (3.6%)
- Information and communication: €122 (4.3%)
- Education services: €19 (0.7%)
- Miscellaneous goods and services: €96 (3.4%)

Household expenditure data in Germany reveal clear priorities: housing consumes over one-third of budgets, followed by significant spending on food and transport—reflecting essential living costs. Leisure and cultural activities also represent a notable share, indicating a strong focus on quality of life. In contrast, education expenses remain low due to the subsidized system. These patterns highlight the need for financial stability, especially in an inflationary context. Notably, proactive healthcare remains absent as a spending priority, reflecting its low perceived importance and limited integration into personal responsibility.

Household expenditure data in Germany reveal clear priorities: housing accounts for over one-third of spending, followed by essential costs such as food and transport. Leisure, recreation, and cultural activities also receive a notable share, underscoring the value placed on quality of life. Education costs remain relatively low, reflecting Germany's publicly subsidized education system. These patterns mirror broader EU trends but show distinct national characteristics. Housing costs in Germany rank among the highest in Europe, particularly compared to Southern countries where homeownership is more common. Transport expenditure is elevated, reflecting the country's strong automotive culture. Likewise, significant spending on recreation reinforces a societal focus on leisure and well-being. ^[16] However,

preventive healthcare spending remains marginal—both in absolute and relative terms—highlighting a systemic feature of Germany's healthcare model, which remains predominantly reactive. Unlike Nordic systems that prioritize early intervention and health maintenance, Germany's statutory insurance emphasizes treatment over prevention. This reflects both structural limitations and cultural attitudes: while citizens invest substantially in lifestyle and leisure, proactive healthcare is neither perceived as a personal responsibility nor prioritized financially. This gap presents a missed opportunity to realign spending habits with long-term health outcomes.

Assuming a budget equal to the average of the categories for Recreation, Entertainment, and Culture (\pounds 245), Restaurants and Hotels (\pounds 177), and Miscellaneous Goods and Services (\pounds 96), we arrive at a monthly amount of approximately \pounds 172.

This translates to an annual expenditure of approximately €2,072.04:

By choosing to invest \in 172 per month in proactive health management, consumers can effectively "short-circuit" the traditional reactive healthcare system, thereby enhancing their health span and overall quality of life.

Making Proactive Health Affordable: A Strategic Reallocation of Resources

One of the main concerns about proactive health management is the perceived cost. However, by strategically reallocating existing spending, consumers can make health a priority without compromising their lifestyle.

Affordable digital health services now exist at monthly price points similar to standard entertainment subscriptions, potentially broadening access. Assuming an average cost of **€15 per month**, the annual expenditure would be approximately **€180**:

For the more affordable plan (≤ 10 /month), the yearly cost would be ≤ 120 , while the premium plan (≤ 20 /month) would cost ≤ 240 . These figures demonstrate that investing in proactive health management can be as affordable as popular lifestyle subscriptions.

As discussed, German households routinely allocate significant resources to lifestyle-enhancing categories such as recreation (\leq 245/month), restaurants and hotels (\leq 177/month), and miscellaneous goods (\leq 96/month). These expenditures reflect a desire for quality of life, yet offer limited long-term returns in terms of health or resilience. In contrast, **redirecting just \in172 per month**—the average of

these discretionary spending categories—can fund a comprehensive, forward-looking health management strategy with tangible benefits for both healthspan and longevity. Here is how such a reallocation could be structured:

1. Digital Health Concierge

Cost: $15/month \rightarrow 180/year$

Features:

- Digital support for appointment scheduling, accessing medical guidance, and storing health records
- Personalized navigation of healthcare systems and prevention planning
 Benefits:
- Reduces the stress and inefficiency of interacting with fragmented healthcare systems
- Enables timely identification of health risks and structured follow-up
- Acts as a coordination hub across diagnostics, supplementation, and lifestyle interventions
- Improves health accountability and follow-through for preventive action

2. Personalized Supplementation

Cost: \in 100/month $\rightarrow \in$ 1,200/year

Purpose:

- Supports preventive health through optimized micronutrient status
- Tailors supplementation to individual deficiencies, genetic predispositions, and lifestyle factors
- Includes vitamins, minerals, adaptogens, omega-3 fatty acids, mitochondrial support, and antiinflammatory compounds

Benefits:

- Enhances immune resilience and reduces susceptibility to infection
- Regulates inflammation, a key driver of chronic disease and aging
- Supports mitochondrial function and energy metabolism, especially under stress or aging-related decline
- Improves hormonal balance, sleep quality, cognitive clarity, and metabolic regulation
- Fills nutritional gaps common even in balanced diets, especially in high-demand or urban environments

- Reduces long-term risk of cardiometabolic, neurodegenerative, and autoimmune conditions
- Creates a biochemical foundation for longevity strategies including caloric restriction mimetics or biological age reversal protocols

3. Quarterly Preventive Check-Ups

Cost: \in 150 per visit \rightarrow 4 visits/year = \in 600/year

Purpose:

- Regular health screenings, biomarker monitoring, and longitudinal tracking of physiological changes
- · Early detection of subclinical dysfunctions and targeted therapeutic adjustments

Benefits:

- Prevents disease progression through early intervention
- Supports adaptive, personalized care based on measurable changes over time
- Reduces reliance on reactive treatments through proactive physiological oversight
- Increases health span by addressing dysfunction before symptoms manifest

Total Annual Cost: €1,980

Equivalent Monthly Cost: €165

This remains within the reallocated discretionary budget of €172/month, demonstrating that proactive health management is not a luxury—it is a strategic and affordable investment.

Going for accessible premium is achievable

In today's rapidly evolving healthcare landscape, opting for a premium health management package is not merely an expense but a strategic investment in proactive wellness. With life expectancy on the rise and lifestyle-related health issues becoming increasingly prevalent, the need for personalized, preventive health strategies has never been more critical. A premium package that includes a one-time comprehensive assessment (€500), specialized diagnostic tests (€1,500), and biannual follow-up tests (€300 per year) provides a holistic approach to maintaining health and vitality. In total, this investment amounts to €2,000 upfront and an additional €300 annually for ongoing monitoring.

At first glance, this may appear substantial. However, when contextualized against typical discretionary spending, the picture changes. According to recent data, the average German spent approximately \in **1,300 per vacation** in 2023—a figure that reflects a single instance of short-term leisure consumption. ^[17] By

contrast, the \notin 2,000 investment in a premium health package provides long-term physiological insights, disease risk stratification, and actionable longevity strategies. In essence, one could argue that a single holiday is roughly equivalent in cost to gaining high-resolution data on one's biological age, metabolic function, cardiovascular risk, micronutrient status, and other key determinants of long-term health.

This comparison underscores a critical shift in perspective: when framed not as medical consumption but as lifestyle prioritization, proactive care becomes not only affordable but rational. For individuals seeking to extend both lifespan and healthspan, reallocating a portion of annual leisure or luxury spending toward personalized health management is a decision that aligns with long-term vitality, independence, and resilience. In this light, the cost of advanced health diagnostics ceases to be an exclusive privilege and becomes instead a tangible, high-yield investment accessible to a far broader population.

Reframing the Cost: A Matter of Perspective

One of the primary reasons individuals hesitate to invest in premium health assessments is the perceived high cost. However, a closer look at typical consumer spending habits reveals an intriguing perspective shift. The &2,000 initial cost for a comprehensive health assessment is only slightly more than the expense of a routine car service for a mid-range vehicle, which typically ranges between &1,500 and &2,000 per year, depending on maintenance requirements. If people are willing to spend this amount to ensure the optimal performance of a machine, why not allocate a similar budget to maintain the most sophisticated and irreplaceable "machine" of all – the human body? ^[2]

Furthermore, the cost is comparable to annual expenditures on cosmetic procedures or premium beauty treatments, which many consumers willingly pay to enhance their appearance and boost self-confidence. These investments cater to aesthetics and convenience but offer limited long-term value. In contrast, a premium health management package provides comprehensive health benefits, including early detection of potential issues, personalized preventive strategies, and continuous monitoring, all of which contribute to long-term well-being and quality of life. ^[14]

Furthermore, proactive wellness is not merely about preventing diseases but also about optimizing overall health and performance. Through personalized nutrition and fitness plans tailored to individual genetic and metabolic profiles, premium health management empowers individuals to achieve peak physical and mental performance. This holistic approach aligns with the growing trend of health resilience and longevity, catering to individuals who are not merely seeking to live longer but to live better. [18]

A Smart Investment: Prioritizing Health in a Consumer-driven Society

In today's consumer-driven society, individuals routinely spend on lifestyle luxuries, from high-end gadgets and designer clothing to exotic vacations and gourmet dining. These expenditures cater to convenience, status, or temporary pleasure but offer little long-term value. In contrast, investing in proactive health management provides enduring benefits, including longevity, vitality, and enhanced quality of life.

This raises an important question: Why not allocate a similar budget to proactive health management? After all, health is the ultimate wealth, and maintaining it is fundamental to enjoying life's luxuries. By re-prioritizing spending habits and making conscious choices to invest in health, individuals can enjoy both lifestyle luxuries and optimal well-being, achieving a balanced and fulfilling life.

Furthermore, the societal perception of health spending needs to evolve. Just as spending on education or property is viewed as an investment, proactive health management should be perceived as a strategic investment in human capital, ensuring productivity, vitality, and independence in the long run. ^{[19][20]}

Evidence of effect

The shift from reactive healthcare to proactive health responsibility is not merely philosophical; it is supported by a growing body of evidence demonstrating the effectiveness and cost-efficiency of preventive health measures. As consumers increasingly seek proactive solutions and digital health tools proliferate, the question of cost versus benefit becomes paramount. In traditional healthcare systems, cost structures are predominantly aligned with reactive treatments—hospitalizations, surgeries, and chronic disease management. However, preventive measures, lifestyle interventions, and personalized health strategies offer compelling alternatives that not only enhance well-being but also reduce long-term costs.

The evidence supporting proactive health interventions is robust and multi-dimensional, encompassing clinical outcomes, cost-effectiveness, and societal benefits. Studies consistently show that preventive care, including lifestyle changes, early diagnostics, and health optimization strategies, leads to improved

health outcomes and reduced healthcare expenses. Yet, the adoption of these measures remains limited due to systemic barriers, cultural resistance, and the entrenched passive consumer mindset. ^[21]

Cost-Effectiveness of Preventive Lifestyle Interventions

A systematic review published in *Diabetes Care* analyzed the economic evaluations of lifestyle interventions aimed at preventing type 2 diabetes (T2D). The review confirmed that such interventions, including dietary changes and increased physical activity, are cost-effective and should be promoted as sound investments in combating diabetes. ^[22]

Economic Impact of Diabetes Prevention

The Diabetes Prevention Program (DPP), a landmark clinical trial, demonstrated that lifestyle interventions—dietary changes, physical activity, and weight management—reduced the incidence of T2D by 58% compared to standard care. A cost-effectiveness analysis of the DPP indicated that such interventions are cost-effective, with costs per quality-adjusted life year (QALY) gained well within acceptable thresholds. ^[23]

Cardiovascular Disease Prevention

The study concluded that implementing lifestyle interventions, particularly those combining established recommendations with the DASH diet, can substantially reduce the estimated 10-year risk of CHD. These findings underscore the public health benefits of promoting comprehensive lifestyle modifications in individuals with elevated blood pressure. ^[24]

Mental Health Prevention

Preventive mental health programs, such as the Chronic Disease Self-Management Program (CDSMP), have demonstrated significant reductions in healthcare costs related to mental health disorders. A study published in *Frontiers in Public Health* evaluated the cost-effectiveness of the CDSMP and found that participants experienced improved health-related quality of life, suggesting that such programs are cost-effective in managing chronic conditions. ^[25]

These studies collectively underscore the economic value of proactive health strategies in preventing and managing chronic diseases. By investing in preventive measures, healthcare systems can achieve

substantial cost savings while improving patient outcomes.

Challenges and Opportunities: Scaling Proactive Health Responsibility

Despite the compelling evidence, several challenges hinder the widespread adoption of proactive health strategies. Cultural resistance to preventive measures, financial incentives favoring reactive care, and a lack of health literacy among consumers are significant barriers. Additionally, the fragmented healthcare market, as discussed in the previous paragraph, complicates the integration of personalized preventive solutions.

However, the rise of digital health technologies, matching platforms, and consumer-driven demand presents a unique opportunity to overcome these challenges. By empowering individuals with actionable health knowledge and connecting them with tailored preventive services, digital solutions can bridge the gap between traditional healthcare and proactive health ownership. ^[25]

To leverage this potential, policymakers, healthcare providers, and insurers must collaborate to redesign healthcare systems, incentivize prevention, and promote health literacy. This paradigm shift from reactive treatment to proactive prevention holds the key to sustainable healthcare systems, improved population health, and cost efficiency in the 21st century. ^[26]

From a personal perspective, the cost of healthcare is often perceived as an unavoidable expense that simply happens to us, much like taxes or utility bills. Yet, this mindset reflects a passive approach to health, where individuals react to illness rather than investing in well-being. To shift to proactive care, consumers need to rethink the value of health itself, moving away from viewing healthcare as an emergency expense towards seeing it as a strategic investment in life quality, longevity, and financial freedom. ^[27]

This shift requires an innovative re-evaluation of costs and benefits, considering not only the monetary expenses but also the intangible costs of poor health: lost productivity, diminished life satisfaction, and reduced independence in later years. By reframing the concept of health from a reactive necessity to a proactive asset, consumers can take ownership of their well-being and make informed decisions that optimize both health outcomes and financial efficiency.

Statements and Declarations

Conflict of Interest

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References

- 1. ^{a, b, c}Steinhubl S, Muse E, Topol E. (2015). "The emerging field of mobile health." Science translational medi cine.
- 2. ^{a, b, c}Topol E. (2019). Deep Medicine: How Artificial Intelligence Can Make Healthcare Human Again. Basic Books.
- 3. [△]Deloitte. (2019). "The Future of Health 2040: A Consumer-Centered Shift." Deloitte Insights. https://www2. deloitte.com.
- 4. [△]Venkataraman A, Kordic I, Li J, Zhang N, Bharadwaj NS, Fang Z, Das S, Coskun AF. (2024). "Decoding senes cence of aging single cells at the nexus of biomaterials, microfluidics, and spatial omics." NPJ Aging. 10(1):57. doi:10.1038/s41514-024-00178-w. PMID 39592596.
- 5. [△]Cox LS. (2022). "Therapeutic approaches to treat and prevent age-related diseases through understanding the underlying biological drivers of ageing." The Journal of the Economics of Ageing. 23:100423. doi:10.1016/ j.jeoa.2022.100423.
- 6. [^]Sun Y, Li Q, Kirkland J. (2022). "Targeting senescent cells for a healthier longevity: the roadmap for an era of global aging." Life Medicine. 1. doi:10.1093/lifemedi/lnac030.
- 7. [^]WHO ESMRO. "Health promotion and disease prevention through population-based interventions, includi ng action to address social determinants and health inequity." WHO ESMRO.
- 8. <u>^</u>WHO. (2024). "Noncommunicable diseases." WHO Newsroom.
- 9. ^{a.} ^bChevinsky J, Chirumamilla S, Caswell S, Nyoni LM, Studer K. (2023). "Clinical Preventive Medicine, Integr ative Medicine, and Lifestyle Medicine: Current State and Future Opportunities in the Development of Emer ging Clinical Areas." AJPM Focus. 3(1):100166. doi:10.1016/j.focus.2023.100166. PMID 38283577.
- 10. ^{a, b}Friebe M, Mittler-Matica R, Niestroj B. "Investors' Perspective on Healthspan in 2025."

- [^]Reubi D, Herrick C, Brown T. (2016). "The politics of non-communicable diseases in the global South." Heal th & Place. 39:179–187.
- 12. [△]Kickbusch I, Pelikan JM, Apfel F, Tsouros AD. (2019). "Health literacy: The solid facts." WHO Regional Office for Europe.
- 13. [△]Saltman RB, Rico A, Boerma WG. (2004). Primary care in the driver's seat? Organizational reform in Europ ean primary care. McGraw-Hill Education.
- 14. ^{a, b}Bauer UE, Briss PA, Goodman RA, Bowman BA. (2014). "Prevention of chronic disease in the 21st centur y: elimination of the leading preventable causes of premature death and disability in the USA." The Lancet. 384(9937):45–52. doi:10.1016/s0140-6736(14)60648-6.
- 15. ^{a, b}Statistisches Bundesamt. (2023). "Household final consumption expenditure up 3.4% in 2022." Statistisc hes Bundesamt.
- 16. ^AEurostat. (2023). "Household budget survey statistics on consumption expenditure." Eurostat.
- 17. [^]Statista. (2024). "Vacation travel spending per person in Germany in 2023, by destination." Statista. www. statista.com.
- 18. [△]European Commission. (2014). "INVESTMENTS IN HEALTH POLICY GUIDE FOR THE EUROPEAN STRUC TURAL AND INVESTMENT FUNDS (ESIF) 2014 - 2020." European Commission. https://health.ec.europa.e u/system/files/2016-11/esif_guide_en_0.pdf.
- 19. [△]Friebe M. (2020). "Healthcare in need of innovation: exponential technology and biomedical entrepreneur ship as solution providers (Keynote Paper)." Proc. SPIE 11315, Medical Imaging 2020: Image-Guided Proced ures, Robotic Interventions, and Modeling. 11315:113150T.
- 20. [△]Khan M, et al. (2023). "Global Healthspan Summit 2023: closing the gap between healthspan and lifespa n." Nature Aging. doi:10.1038/s43587-024-00593-4.
- 21. [△]Russel L. (2009). "Preventing Chronic Disease: An Important Investment, But Don't Count On Cost Saving s." Health Affairs. 28(1):42. doi:10.1377/hlthaff.28.1.42.
- [△]Alouki K, Delisle H, Bermúdez-Tamayo C, Johri M. (2016). "Lifestyle Interventions to Prevent Type 2 Diabet es: A Systematic Review of Economic Evaluation Studies." J Diabetes Res. 2016:2159890. doi:10.1155/2016/21 59890. PMID 26885527.
- 23. ANCCDPHP. (2024). "Health and Economic Benefits of High Blood Pressure Interventions." NCCDPHP.
- 24. [△]Maruthur NM, Wang NY, Appel LJ. (2009). "Lifestyle interventions reduce coronary heart disease risk: resu Its from the PREMIER Trial." Circulation. 119(15):2026–31. doi:10.1161/CIRCULATIONAHA.108.809491. PMID 19349322.

- 25. ^{a, b}Basu R, Ory MG, Towne SD, Smith ML, Hochhalter AK, Ahn S. (2025). "Cost-Effectiveness of the Chronic D isease Self-Management Program: Implications for Community-Based Organizations." Frontiers in Public Health. 3.
- 26. [△]Friebe M. (2025). "Health Transformation Through Prevention Requires Progress Metrics for Value Creatio n." Qeios. doi:10.32388/sbg9b7.
- 27. [^]Mittler-Matica R, Friebe M. (2024). "Healthspan Horizon Pioneering Preventive Care as the New Stand ard of Healthcare." Qeios. doi:10.32388/6ADY2Z.

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