Health Ballistics:  
Multiple Reference Point Informed Probability Theory

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ABSTRACT

Health Ballistics aims to quantify preventive health measures in relation to their health impact on an individual’s productive lifespan, and in turn for a societally beneficial impact. An uninformed individual’s behaviors will significantly affect their overall Health Wealth Commodity and are based upon the notion that what an individual does not know will with high probability lead to unhealthy monetary savings decision further empowering already established poor health outcome trajectories. The current theory emphasized the necessity for intensified focus on only a few health variables, as only a few variables indeed affect an individual’s health trajectory with extreme weight at any moment. By calculating the highly probable and realistic health outcomes of an individual’s health behavior based on these variables, a monetary savings can be retrospectively associated with the preventive measures utilized to obtain the health outcomes observed and in turn, prospectively associated to calculate statistically predictable individual health behavior and chronic diseases.

KEYWORDS

Behavior, Finance, Health Ballistics, Health Investment Worker, Health Wealth Commodity, Healthcare, Reference Point, Trajectory

1. SUMMARY

Health Ballistics is a theory utilizing certain aspects of Prospect Theory, Kuhn’s Theory, Pareto’s Principle, Maslow’s Hierarchy of Needs, Geoffrey Rose’s Sick individuals and Sick Populations and the Arrhenius Equation, to quantify preventive health measures in relation to their impact on an individual’s health; directly affecting their personal and societally productive lifespan. This outcome is in reference to an individual’s nominalized Health Wealth Commodity value, preservation and reacquisition. Individual’s uninformed behavior will significantly affect their overall health and is based upon the notion that what an individual does not know will with high probability lead to unhealthy behavioral decisions; further reinforcing unhealthy trajectories, leading to highly probable and predictable poor health outcomes. Intuitively, an individual will therefore not change their health trajectory unless informed of their highly probable and realistic health trajectory with disease as an end point. This intimate decisional process is heavily associated with the gains and losses of each respective health end point. Once behavior alteration commences, renovation of their Health...
Architecture occurs and Inertia Permanence of the new behavioral pattern will be observable. The current theory emphasized the necessity for intensified focus on only a few health variables, as only a few variables truly affect an individual’s health trajectory with extreme weight at any moment. Due to only a few health variables greatly affecting an individual’s Health Wealth Commodity value and each person being unique regarding their Health Wealth Commodity value portfolio, their most heavily weighted variables must be individually addressed; optimally leading to the greatest return on an individual’s health trajectory alteration in any given moment. By positively altering these highly weighted variables, a Health Architecture Renovation can be nominally appreciated, which can be correlated to their individual maximal metabolic threshold. When their maximal metabolic threshold is further optimized, a decrease in chronic disease by delaying or stopping disease progression or initiation can be appreciated in an individual’s present moment. A numerical value can also be assigned to the interaction of internal and external reference points impacting an individual’s Health Behavior Value - Inertia and Health Architecture. By calculating the highly probable and realistic health outcomes of an individual’s health behavior based on this interaction, a nominal value can then also be assigned to an informed, realistic future health decision performed by an individual, and in turn, correlated to a statistically probable future health outcome. Monetary savings can be retrospectively associated with the nominalized preventive measures utilized to obtain the health outcomes observed and in turn, prospectively associated to calculate statistically predictable individual health behavior and disease processes on an individual and population level. When these heavily weighted variables are individually optimized, reduced disease symptomology and number of chronic comorbid diseases, absenteeism, presenteeism, and increased productivity, peak metabolic rate, quality of life and number of quality adjusted life years can be appreciated. This is only possible by increasing patient and Health Investment Worker reciprocity / responsibility regarding Health Wealth Commodity preservation and reacquisition which is based on system wide acceptance of highly predictable effects of future preventive measures.

2. TERMS

- An individual’s Health Wealth Commodity is a naturally occurring, retainable and revitalizable commodity throughout an individual’s life. This is the nominalization of an individual’s health;
- Each health related decision an individual makes, either retains their Health Wealth Commodity or exchanges a portion of their Health Wealth Commodity for an equally weighted portion of disease;
- An individual’s lifelong health trajectory from birth to death is virtually synonymous to that of any other physics or mathematics based calculable trajectory such as traditional ammunition ballistics which is measureable, calculable and predictable;
- An individual making a health decision relies upon Multiple Reference Points all converging to be formulated which can be either internal or external and volatile or non-volatile;
- A very few variables carry a significantly impactful weight to realistically and measurably affect an individual’s health trajectory over a life time, despite an infinite number of variables that could ultimately have an effect on trajectory at any one time;
- The Healthy Life Fundamental Cornerstones are the most important variables for Health Wealth Commodity retainment. These heavily weighted and highly influential variable are nutrition, sleep, fitness, never tobacco use, social interaction, self-reported health survey, the number of current diagnosed diseases an individual has and the number of medications an individual is currently using;
- Increasing ones knowledge of the positives of a healthy lifestyle and negatives of an unhealthy lifestyle in reference to optimal use of the Healthy Life Fundamental Cornerstones on a daily basis from the youngest age possible throughout life, allows for the greatest lifelong disease prevention; this is noted through the nominal value of Health Wealth Commodity preservation;
Hospital IT Sophistication Profiles and Patient Safety Outcomes: A Comparison of Three States
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