



February 14, 2022

Delegate Joseline A. Pena-Melnyk, Chair
House Health and Government Operations Committee, Room 241
House Office Building
Annapolis, Maryland 21401

RE: FAVORABLE – HB0059 – Health Standards – Plant-Based Meals in Prisons

Dear Chairs, Vice Chairs and Committees:

The HBCU College of Plant-Based Lifestyle Medicine (HBCUCPLM) is a 501c3 founded at the start of the Covid Pandemic by Black medical professionals and alumni of HBCUs around the country dedicated to clinical and worksite practice of plant-based Lifestyle Medicine as the foundation of a transformed and sustainable health care system. Plant-Based Lifestyle Medicine (PLM) involves the use of evidence-based therapeutic approaches for disease management that include the practice of utilizing lifestyle interventions that include prescribing whole food plant-based diet, regular physical activity, adequate sleep, stress management, fresh air, sunshine, adequate consumption of water, avoidance of the use and ingestion of substances that increase oxidative stress, and pursuing other non-drug mental health modalities, to treat, reverse, and prevent chronic disease and to treat and reduce the impact of infectious diseases.

The popular phrase “Let thy food be thy medicine and medicine be thy food”, often ascribed to Hippocrates (400 BC) illustrates that PLM is not a new alternative form of disease management, and American historic medical research reveals that PLM has always been practiced medical practitioners until the early 1900’s before the transition to pharmacological approaches.

However, it is the mission of the HBCUCPLM’s to become the authoritative voice of PLM to minimize disinformation in communities of color about the practice and to educate, equip, and board certify a new generation of medical practitioners of color and at HBCUs in the practice of PLM as the first treatment option in clinical practice and worksite settings through live and online CME-accredited events, educational offerings, certification, clinical practice tools, patient education resources, economic research, networking opportunities and advocacy efforts. ([Click her to view organization strategic plan](#)) HBCUCPLM is a sister organization of the American College of Lifestyle Medicine and the board certifying organization the American Board of Lifestyle Medicine.

Therefore, the HBCUCPLM supports HB0059 and requests a favorable report for the following reasons.



WHY HB0059

HB0059 regarding Health and Wellness Standards for Correctional Facilities and Health Care Facilities is a ground breaking piece of legislation that will require Maryland Hospitals to provide all in-hospital patients plant-based meal options upon request. HB0059 will also launch a two-year pilot program that will allow Maryland prison inmates in four (4) selected prisons to also have the option to select plant-based meals at every meal program. The bill not only gives in-patients and inmates in select facilities the choice to select healthy plant-based meals as option, the bill also requires the Maryland Department of Public Safety & Corrections (DPSC) to prepare plant-based meals based on the surveyed taste preferences of the inmate to prevent inmate food revolts.

Unlike many other plant-based meal bills passed in California and New York, HB0059 contains an educational component that requires DPSC to provide information to all inmates about the health benefits of a plant-based diet, particularly when defendants are checked in to a facility. Of most importance of the educational component of the bill is the requirement that the Maryland Department of Health, Office of Minority Health & Health Disparities provide Lifestyle Medicine education training information to all medical professionals in Maryland to encourage medical professionals to become trained and certified in Lifestyle Medicine.

Lifestyle Medicine is codified in HB0059 and defined as the branch of medicine dealing with research, prevention and treatment of disorders caused by lifestyle factors, including nutrition, physical inactivity, chronic stress as defined by the American College of Lifestyle Medicine.

As Founder and Chair of the HBCU College of Plant-Based Lifestyle Medicine, which is the lead proponent of the bill with the Maryland Plant-Based Advocates Coalition, I believe it's time for Maryland inmates and vulnerable Maryland hospital patients to be given the choice to select healthy plant-based meal options to improve their health. Before the pandemic, Maryland has been in a Diabetes epidemic, which according to the Maryland Diabetes Association cost Maryland \$6.5 billion in treatment and care for the over 623,041 Maryland diabetics and 1.6 million prediabetics, which according to many medical reports diabetes laid the foundation for the worse outcomes from COVID-19 infections.

Now that the data shows that Black and Brown communities have suffered disproportionately from COVID-19 deaths due to the prevalence of underlying chronic degenerative disease, HB0059 is an opportunity to place an emphasis on plant-based nutrition as an evidenced based intervention that can make a difference in the health of communities of color and the battle against COVID-19 -19 infections."

According to the Maryland Department of Public Safety & Corrections monthly [Covid-19 report](#) on COVID-19 positive, deaths and unrecovered inmates in Maryland's 19 state run prisons, since the start of the COVID-19 Pandemic there has been 22 inmate deaths as of February 8, 2021 and approximate 324 inmates have yet to recover out of the over 3,997 that tested positive.

35% of the diseases suffered by Maryland inmates are chronic diseases, 30% is associated with Hep C and 30% due to HIV. Annually, DPSC spends approximately \$136,000 per year on health care under a five (5) year contract with Corizon Health which began in late 2019. Healthcare cost per inmate is approximate \$7,157. Annual Pharmacy costs are about \$70 million per year under a five year contract with Correct Rx Pharmacy.

According to the [written testimony](#) provided to the Maryland House Appropriations Committee on February 5, 2021, DPSC has spent approximately \$30 million on increased health care costs due to COVID-19 of which \$11 Million was spent on specific medical care alone.

However, during this pandemic the relationship between immunity and nutrition is being re-explored by scientist around the world to understand the role of nutrition in in coronavirus disease 2019 (COVID-19) It was reported on the [NIH National Library of Medicine website in the Journal of Clinical Medicine August 2020](#) that Vitamin B1, B6, B12, vitamin D (25-hydroxyvitamin D), folate, selenium, and zinc levels were measured in 50 hospitalized patients with COVID-19. Overall, 76% of the patients were vitamin D deficient and 42% were selenium deficient. The COVID-19 group showed significantly lower vitamin D values than the healthy control group (150 people, matched by age/sex). Severe vitamin D deficiency (based on a cut-off of ≤ 10 ng/dl) was found in 24.0% of the patients in the COVID-19 group and 7.3% in the control group. Among 12 patients with respiratory distress, 11 (91.7%) were deficient in at least one nutrient. However, patients without respiratory distress showed a deficiency in 30/38 cases (78.9%; $p = 0.425$). These results suggest that a deficiency of vitamin D or selenium may decrease the immune defenses against COVID-19 and cause progression to severe disease. However, more precise and large-scale studies are needed.

A new study by Advocate Health Care and Abbott found that across the United States, 1 in 3 people enter the **hospital malnourished**, which can often go unrecognized and undertreated and that:

- optimizing nutrition care in the hospital could help reduce 30-day readmission rates by 27 percent and
- the average hospital stay by almost **two days** for malnourished patients.

Dr. Milton Mills, Critical Care Physician, and board member of the HBCU College of Plant-Based Lifestyle Medicine, says that “chronic disease, like diabetes, does in fact exacerbate the inflammatory response derived from COVID-19, increasing the risk for adverse affects and mortality because of the systemic inflammation present in subject with noncommunicable diseases (NCDs), like diabetes, tend to make respiratory symptoms more severe.”

According to Ruby Lathon, Phd, and Holistic Nutritionist and President of the HBCUCPLM “the relationship between the quality and quantity of macronutrients that come from plant-based foods in a diet and immune system response is not new information. Nutritionist are taught and research has



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shown that omega-3 fatty acids found in plant-based foods like flaxseeds with eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA) can inactivate enveloped viruses by modulating the optimal lipid

conditions for viral replication. In other words, Plant-based foods can have an immediate effect in the battle against Covid-19 infections for inmates in prison and those in hospitals.

Dr. Baxter Montgomery, cardiologist, member of the HBCUCPLM and principal of [Montgomery Heart & Wellness Center](#) in Houston, Texas has treated many of his heart patients who have tested positive for Covid-19 with plant-based interventions and none of his patients have had to go to into the ICU despite their pre-existing sever heart condition. Dr. Montgomery provides an online plant-based nutrition program for anyone around the country who want to reverse their chronic diseases or are Covid -19 positive and want to optimize their own immune system to fight the infection.

Based on the forgoing evidence and testimony from the members of the HBCUCPLM, we request a favorable report on HB0059 so that inmates and in-hospital patients can be given the most effective tool for better health.

Sincerely,

Jo Saint-George

Jo Saint-George, Esq.
Chair



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