

To: Members of the JTFUHC  
Date: September 29, 2020  
From: Tom Sincic, MSN, FNP-Retired

My name is Tom Sincic, a retired Family Nurse Practitioner. Although not an expert in Public Health but with a masters in Community Health and former Community Health Faculty, I know enough to be helpful. I always made community health and public health a necessary part of my clinical practice such as in Rural East Tennessee with the introduction of fluoride supplements to infants and children at WIC visits and in ending smoking in the Multnomah County jail.

Purposes 1 and 2 of SB 770 were intentionally listed as number 1 and 2 because that is how you build a system of health and healthcare that allows the achievement of the other purposes under the values and principles listed. They are necessary to get to an affordable, accessible, equitable system of healthcare. We have seen with covid-19 how quickly a healthcare system can be overwhelmed and the resulting inequities when we are not truly prepared for threats to the public health. Here are just a few items that are necessary to improve the health of individuals, families, and communities.

1. Do more to ban the thousands of chemicals in our food. We know about food deserts and the challenges of the most vulnerable to get access to healthy food. The US Food and Drug Administration hasn't regulated the 10,000 chemicals added to our food, according to a petition filed by groups representing pediatricians, the environment, public health, as well as food and consumer safety advocates. CNN: [https://apple.news/ALYEhgqTaR82TkETJ\\_UO-Hw](https://apple.news/ALYEhgqTaR82TkETJ_UO-Hw)
2. Focus on access to a safe water supply which does not depend on bottled water (a threat to access to public water and an extreme environmental hazard). Just, a short drive from Portland at the Warm Springs Reservation, thousands of people, a rural health clinic, businesses and senior housing are without safe tap water, while some places don't have running water at all. Water is life. <https://www.opb.org/news/article/water-crisis-returns-to-warm-springs-as-virus-cases-rise/>
3. PPE shortages are well known and documented by the state but terribly tracked and not yet addressed putting frontline workers--called heroes--at risk.
4. Address the obesity epidemic and associated epidemic of endocrine disorders and inflammatory disease. In my first 20 years I never saw a case of Type 2 diabetes. It was called "adult onset"--not a childhood disorder. By my last years, I was caring for multiple kids with pre-diabetes and type 2 diabetes and a range of other body system ills caused by obesity. National Center for Biotechnology Information has supplied information. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5664782/>.
5. Furthermore, obesity puts people of any age at increased risk of severe illness from COVID-19. Most of the other listed conditions under risk of severe illness are often obesity induced.
  - o Cancer
  - o Chronic kidney disease
  - o COPD (chronic obstructive pulmonary disease)
  - o Immunocompromised state (weakened immune system) from solid organ transplant
  - o Obesity (body mass index [BMI] of 30 or higher)
  - o Serious heart conditions, such as heart failure, coronary artery disease, or cardiomyopathies
  - o Sickle cell disease
  - o Type 2 diabetes mellitus

Even mild obesity is a higher risk than the following:

- o Asthma (moderate-to-severe)
- o Cerebrovascular disease (affects blood vessels and blood supply to the brain)
- o Cystic fibrosis
- o Hypertension or high blood pressure
- o Immunocompromised state (weakened immune system) from blood or bone marrow transplant, immune deficiencies, HIV, use of corticosteroids, or use of other immune weakening medicines

- Neurologic conditions, such as dementia
- Liver disease
- Pregnancy
- Pulmonary fibrosis (having damaged or scarred lung tissues)
- Smoking
- Thalassemia (a type of blood disorder)
- Type 1 diabetes mellitus

<https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html>

6. Find a way to make strong recommendations about doing something about sugary drinks--one of the poisons of excess that cause these diseases starting in the preconceptional period. Sugary drinks are a major contributor to obesity and diabetes. WHO guidelines recommend that, to prevent obesity and tooth decay, adults and children reduce their consumption of free sugars to less than 10% of their daily energy intake (equivalent to around 12 teaspoons of table sugar for adults). The guidelines suggest further reducing intake of sugars to below 5% of daily energy intake (around 6 teaspoons of table sugar for adults) for additional health benefits (1). Over-consumption of sugar is a major contributor to obesity, diabetes and tooth decay. In the current food environment, it is very easy to consume too much sugar, especially from sugary drinks. Sugary drinks are a major source of sugar in the diet, and its consumption is increasing in most countries, especially amongst children and adolescents. On average, a single can of a sugary drink contains around 40 grams of free sugars (equivalent to around 10 teaspoons of table sugar).

World Health Organization:

<https://apps.who.int/iris/bitstream/handle/10665/260253/WHO-NMH-PND-16.5Rev.1-eng.pdf?sequence=1>

American Heart Association:

<https://www.heart.org/en/healthy-living/healthy-eating/eat-smart/sugar/added-sugars>

7. Recommend measures including public health approaches to address not the results of toxic stress but the causes of it, including racism, homelessness, income inequality, and more. Clinical approaches to addressing the many health problems caused by toxic stress including increase premature birth among people of color are not the answer and never will be the answer.

<https://onlinelibrary.wiley.com/doi/abs/10.1111/phn.12290>

While every subcommittee should be thinking about public health, there should be one that focuses on it. A system that dumps its resources downstream to clinical care will never be affordable or equitable. Marginalized populations will never really get a chance to achieve health.

I strongly suggest that you invite a group of public health and public health policy experts into this work. I especially recommend Dr. Charles Gallia, long time OHA employee and one of the chief crafters of SB 770. The sooner the better.

Tom Sincic, MSN, RN-E, FNP-Retired  
 President, Health Care for All Oregon  
 503-901-7519