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August 20, 2011

Honorable Governor Edmund “Jerry” G. Brown, Jr.  
Office of the Governor, California State Capitol  
Sacramento, CA 95814  
**FAX: 916-558-3160 (3 pages)**

**RE: URGE SIGNING OF SENATE BILL 380 (WRIGHT):  
EDUCATING PHYSICIANS ON NUTRITION AND LIFESTYLE FOR  
PREVENTION AND TREATMENT OF CHRONIC DISEASES**

Dear Governor Brown:

On behalf of the the California Academy of Preventive Medicine (CAPM), the sponsor of SB 380, I urge you to sign this bill, which will help physicians to deal more effectively with the greatest causes of death and disability in California. We are the specialty society for California physicians practicing public health and Preventive Medicine, and are uniquely aware of the importance of lifestyle and nutrition in prevention and treatment of chronic diseases.

SB 380 does three important and valuable things:

- 1) It authorizes the Medical Board of California to set content standards for continuing education activity concerning prevention and treatment of chronic disease through nutrition and lifestyle changes. This bill would not establish a new requirement for physicians to obtain a certain number of hours of education on these subjects, as had been done before for pain and end of life care and was considered burdensome by physician groups. Instead, this bill would help assure that whenever physicians choose to take a course on a chronic disease, it should include relevant information on nutrition and lifestyle as it affects the disease’s prevention and treatment.
- 2) It requires the board to periodically disseminate information about the prevention and treatment of chronic disease through nutrition and lifestyle changes to each licensed physician and surgeon and to each general acute care hospital in the state.



- 3) It requires the board to convene a working group of interested parties to discuss nutrition and lifestyle changes for the prevention and treatment of chronic disease at one of its quarterly meetings.

SB 380 is very important, because most deaths in the United States today are due to chronic diseases, particularly heart disease, cancer, stroke, chronic obstructive lung disease, diabetes, and kidney and liver disease. The main underlying causes are too much fat, sugar, and salt in most people's diets, physical inactivity, smoking, alcohol, and unsafe sexual and substance-related behavior. Our frightening epidemics of obesity and diabetes increasingly involve children. Only diet and lifestyle changes can prevent these diseases, no medication or surgery can do so. Furthermore, once these diseases develop, no medication or surgery will work without also modifying diet and lifestyle. For example, a patient who has undergone a coronary stent or bypass, at great expense to society and with considerable risk, will likely clog it up again and be in as bad shape as before within two years, unless he or she changes the lifestyle habits that led to the disease in the first place. Lifestyle and nutrition are not only an alternative to other treatments, they must be combined with medication and surgery for the latter to even be effective.

Over recent years, medical guidelines from the most prestigious national advisory panels, for treatment of hypertension and high cholesterol, have been revised to recommend that physicians should start with diet and lifestyle changes before prescribing medication. However, most physicians are not doing so effectively, because they have not been educated on what to tell patients and how to help them through such changes. Physicians have been trained for decades to go directly to medication and surgery, and continue to be inadequately educated on how to utilize nutrition and lifestyle changes to improve the health of their patients. Many physicians are unaware that changes in diet can actually reverse many cases of coronary artery disease, diabetes, and hypertension, dissolving plaques on arteries and normalizing blood sugar and blood pressure so that medications can be discontinued or reduced, and surgery avoided.

Today's overwhelming challenge in which physicians are undereducated and that impacts the most preventable deaths and disability is in the area of nutrition and lifestyle. What this bill provides, i.e., guidelines from the board for content of the continuing education courses on chronic diseases to include these topics, and dissemination of information by the board about this area, with the advice of a working group, will be positive steps to help California's physicians to be more competent at preventing and controlling the most lethal of diseases in our state.

The Medical Board of California, and the Assembly Appropriations Committee, have determined that the **costs of this bill to the state will be minimal and absorbable under the budget of the board.**

**CAPM is proud to be the sponsor of Senate Bill 380. Please sign it into law.**

CAPM would also greatly appreciate a recommendation from the Governor's office to the Medical Board of California (which is organized under the Department of Consumer Affairs), **that when they organize the working group called for in SB 380, they invite our organization, the California Academy of Preventive Medicine, to participate**, as the sponsors of the bill and as the state's recognized specialists in Preventive Medicine.

Sincerely,

A handwritten signature in blue ink, appearing to read "Eric Walsh".

Eric Walsh, MD, MPH, President,  
California Academy of Preventive Medicine