

Take these fruits and vegetables and call me in the morning - The Boston Globe



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At the Brockton Neighborhood Health Center, a nutrition and cooking class is offered to patients at the clinic.

By Lisa Zwirn Globe Correspondent June 21, 2016

BROCKTON — A small group of patients at the Brockton Neighborhood Health Center sip ginger tea and listen to dietitian Mary Lynch explain how eating a few servings of fruit every day can help lower their blood pressure. The weekly Fresh Approaches to Healthy Eating class at the new demo kitchen here is a prescription — patients are referred by physicians — for learning good eating habits.

Lynch teaches the DASH diet (Dietary Approaches to Stop Hypertension), which is rich in fruits and vegetables, low- and non-fat dairy, lean protein, whole grains, and heart-healthy fats to reduce the risk of heart disease, stroke, diabetes, and even some cancers. Two health center employees translate Lynch's message into Cape Verdean (Portuguese-based) Creole and Haitian (French-based) Creole. The day's recipes are pineapple and avocado salsa, with baked tortilla chips, and raspberry-beet smoothies.

BNHC's new satellite office and classroom kitchen opened last fall adjacent to the new Vicente's Supermarket. The pairing, says health center CEO Susan Joss, was "part of the vision to affect the health of the community." With a diabetes rate of 12 percent of the patient population, "we decided to take control of our ZIP code and

change the dynamics,” she says.

The concept of food as medicine is not a new one. Hippocrates, the ancient Greek physician, purportedly said: “Let food be thy medicine and medicine be thy food.” In practice, it means: “You can make food choices that will improve your health,” says Mary Flynn, research dietitian at the Miriam Hospital in Providence and associate professor at Brown University.

Many medical programs are now actively linking food to its critical role in everyday health. Doctor Deborah Frank, director of the Grow Clinic for Children at Boston Medical Center, rattles off a list of nutrition-sensitive disorders, including diabetes, hypertension, heart disease, kidney disease, under- and overweight problems, thin bones, and more. “Being undernourished is bad for your health at any age,” she says.

The statistics are grim: More than one-third of adults and 17 percent of youth are obese. About 29 million people, or 9.3 percent of the US population, have diabetes, and 37 percent of adults have prediabetes. According to the American Diabetes Association, the total estimated cost of the disease was a staggering \$245 billion as of 2012, which includes health care services, medications, and lost productivity. Obesity-related direct and indirect costs are estimated at more than \$250 billion. Approximately 70 million adults (29 percent of the population) have high blood pressure, a cost to the nation of about \$46 billion per year.

“We’re willing to spend money for medicine, but we need to give people the wherewithal to access and purchase healthful foods,” says Frank. “Good food is like a miracle drug.” Yet too many people are priced out of a healthy diet, she says. Low-income neighborhoods tend to have the least access to fresh produce, the most fast-food restaurants, and poor health education and related services.

At BMC, patients deemed food-insecure are given prescriptions for healthful foods from the on-site Preventive Food Pantry. “We provide food for about 7,000 people per month,” says manager Latchman Hirall. “Families learn from what they pick up. They’re not going to get sugary cereals,” he says. “It’s a behavioral change that we’re trying to promote as well.” Also at the hospital, registered dietitian and chef Tracey Burg leads cooking and wellness classes for both patients and staff.

Other area hospitals and health centers are working to improve the health of their communities, as well. Massachusetts General Hospital’s Chelsea HealthCare Center initiated the Healthy Chelsea coalition to improve school meals and increase students’ exercise time. The coalition also facilitated the city’s trans-fat ban, implemented a little more than a year ago. The center’s food pantry opened in 2014. “There’s no stigma to it,” says Sarah Abernethy Oo, MGH Chelsea’s director of community health improvement. “It’s right here where people get their primary care.”

At MGH Charlestown, doctors Katherine Crabtree and Carolina Abuelo worked on a pilot garden project last year. This year, more than a dozen patients planted containers of peas, cucumbers, tomatoes, peppers, carrots, and more. The goal, says Crabtree, is “for people to feel more like their health is in their own hands.”

Along similar lines, doctor Jeffrey Geller, who runs group medical visits at Greater Lawrence Family Health Center, employs an empowerment model to help patients struggling with illness. One group keeps a vegetable garden. As many of the patients eat at local soup kitchens, says Geller, “fresh food is part of the healing and

contribution to the community.” The group talks about food and cooks together using the vegetables they grow. “When people realize that the food they eat contributes to their health and they can do something about it, it empowers them,” he says.

Dietitian Flynn has spent 20 years researching how food can be used as medicine, and specifically how extra virgin olive oil, with its health-promoting phenols, enhances plant-based diets. “Americans don’t prepare and eat vegetables in a way that is health-promoting,” she says. “Fat is needed to absorb some of the important phytonutrients found in plant products that will help reduce the risk of heart disease and some cancers.” Her diet calls for at least four servings of vegetables a day (one serving is ½ cup of vegetables or 1 cup salad greens), prepared or cooked with 1 tablespoon of extra virgin olive oil per cup of vegetables. The most nutritious varieties are those red, orange, yellow, and dark green roots, leaves, peppers, and squash, as well as the cruciferous (brassica) family, which includes broccoli, cauliflower, cabbage, Brussels sprouts, and kale. (Flynn’s “Food Is Medicine” program is detailed on her website, www.medfooddiet.com.)

On a national level, there is growing recognition that US healthcare is focused primarily on treatment of disease, with too little attention paid to prevention, particularly of those conditions where good diet and exercise play a crucial role. As a result, the movement to educate medical professionals about the importance of food, nutrition, and home cooking has gained momentum. Perhaps the most visible initiative is Healthy Kitchens, Healthy Lives (www.healthykitchens.org.), founded in 2006 as a collaboration between Harvard University and the Culinary Institute of America. “If we could change clinicians’ own behaviors, they are much more likely to proactively change their patients’ behaviors,” says cofounder David Eisenberg, director of culinary nutrition and adjunct associate professor of nutrition at Harvard T.H. Chan School of Public Health.

At the organization’s annual conference, at CIA’s Greystone, Calif., campus, medical professionals (more than 4,000 to date) learn to make better food and lifestyle choices, including how to shop for food, cook, and eat, as well as pay attention to movement and exercise, and increase mindfulness about eating. “With diabetes and obesity skyrocketing and younger generations that don’t know how to cook, we have to rethink our relationship to food,” says Eisenberg. He adds that doctors need to know how to have these conversations with patients. A recent offshoot initiative, the Teaching Kitchen Collaborative, is developing and implementing best practices for operating teaching kitchens in hospitals, medical schools, medical offices, universities, and corporations.

At the Brockton health center, which offers just these kinds of cooking-for-health classes, dietitian Lynch and primary care physician Nabila Azam are working closely with Vicente’s Supermarket on a program to guide shoppers toward healthful foods. Soon, colorful floor mats will direct people back to the produce section of the market, and placards on shopping carts will feature pictures of seasonal fruits and vegetables. BNHC CEO Joss explains that in the University of New Mexico’s pilot study of the program, produce purchases increased by 76 percent.

Vicente’s store director Brian Vicente, son of founder Manuel Vicente, says, “It’s better if we change our diet before we’re told to by physicians.”

Joss adds, “With the combined work of the health center and the market, [Vicente’s has] started to think of

themselves as part of the public health system.”

After attending Lynch’s healthy-eating class for the first time, two Cape Verdean women, Margarida Wilcox and Maria Brandao, head to Vicente’s to purchase Mrs. Dash seasoning, a salt-free mix that Lynch recommends over the salt-laden Maggi brand. With Brian Vicente translating, Wilcox says, “The way [Lynch] seasoned the food, I’ll go home and season it like that.” Brandao says, “I’m going to come every week and then make the recipes.”

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