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Inmate Glen Lee uses a walker to make his way gingerly around the Metro Jail in Nashville. He's constantly groggy, weak, uncomfortable.

That's a far cry from the man who walked in without assistance after his November arrest on theft and assault charges.

What happened to Lee during the past three months is the subject of a recent internal review by Metro's Department of Public Health, aimed at determining whether systemic problems are denying diabetic Metro Jail prisoners the medical care they need. City officials said Lee has received appropriate medical treatment.

But in a jailhouse interview last week, Lee claimed that a variety of missteps by jail medical staff left him in a diabetic coma and hospitalized for three weeks, leaving him fragile and concerned for his health.

"Somebody made a mistake," he said. "But I don't know what it was and what was wrong."

Lee's case marks the third in recent months in which a diabetic Metro Jail inmate or his relatives have alleged that jail staff failed to treat their disease properly.

On Jan. 11, inmate Paul Burton III was hospitalized for three days in what he described as a diabetic coma and accused jail staff of giving him much less insulin than he was receiving on the outside. After his illness, jail staff increased his insulin levels, jail records show.

Eight days after Burton was hospitalized, another diabetic inmate died in January, hours after requesting medical attention that he did not receive. An internal report by Prison Health Services, the private firm that contracts to provide medical care to inmates, found myriad errors with the care given to Ricky Douglas in the days before he died.

Last week, The New York Times published a series detailing widespread problems with the care provided to prisoners in New York by Brentwood-based Prison Health Services, the country's largest provider of health services for prisons and jails.

Prison Health Services is in its final year of a five-year contract with Metro. A new contract is to be awarded this summer.

Lee, who also has a seizure disorder, claims that he fell into a three-day diabetic coma in early January after jail officials refused to give him the correct dosage of insulin and fed him an inappropriate diet. About two weeks after his arrest, he was hospitalized for about three weeks because his blood sugar reached 520, well above the 120 level required to keep him stable.
As he began to fall ill, Lee said he caught the attention of a nurse but was told that he would need to submit a "sick call" slip to see a physician.

Under Metro Jail rules, prisoners who can afford to pay are charged $3 per sick call. Lee said he believed he would be unable to see a doctor because he didn't have the money. Jail officials said that indigent inmates will be seen without paying the fee.

When his condition worsened, a cellmate called for help and Lee was taken to the hospital.

"I started getting woozy," Lee said. "I ended up passing out."

Lee's brother, Thomas Lee Colbert, a church deacon in Greenville, Miss., visited Lee in jail a couple of weeks ago and said he cried when he saw his brother looking extremely ill and in a wheelchair.

"(The jail staff) don't want to do what they are supposed to do," Colbert said. "They don't care."

Jail medical staffers say they have reviewed the medical records of numerous diabetic prisoners and have found no systemic problems.

Public health officials said Friday that they gave Lee the level of treatment he required, except for a five day window in early January when, they say, Lee refused to have his blood-sugar level checked.

"Until there's an emergency situation that you have to intervene, that's a competent adult that can make his own decisions about medical care," said Bob Eadie, spokesman for the Metro Public Health Department.

Since Lee is incarcerated, The Tennessean was unable to ask him to respond to jail officials' claim that he refused treatment.

Even before Lee's case, however, concerns over the cases of inmates Douglas and Burton had caught the attention of federal authorities, health advocacy groups and community organizations, who have contacted jail officials or the prisoner's families in recent weeks.

FBI officials confirmed recently that agents have been talking with the Davidson County Sheriff's Office about the problems. Douglas' relatives said the FBI also has contacted them. Doug Riggin, special agent in charge of the Nashville FBI office, declined to discuss details of the FBI's involvement.

The American Diabetes Association has been in touch with attorneys for Burton and Douglas, seeking information about their medical care at the Metro Jail. In the past, the ADA has been involved in other lawsuits to ensure proper treatment of diabetic prisoners elsewhere.

"What is important in a jail situation is that you need to maintain the management system the person had on the outside, or it is extremely dangerous, such as in the case of Mr. Burton, who
did not get enough insulin," said Shareen Arent, national director of legal advocacy for the group.

"You can't wait and maintain medications a couple of days later like you could for other chronic diseases," she said. "Medication needs to happen constantly."

Kelvin Jones, executive director of the Metro Human Relations Commission, said he and a representative of the Nashville NAACP met with Davidson County Sheriff Daron Hall discuss their concerns about the care meted out by Prison Health Services.

"While I understand the sheriff's position, and understand the health department's position, you just can't contract away the city's responsibility," Jones said.

"Someone needs to stand up and take responsibility, and the party that needs to do that is the city. We need to take affirmative steps and identify if there are issues we should be concerned about relative to medical care within the jail system but also taking a look at the vendor."

Nashville attorney David Raybin, who is representing Burton, is also reviewing whether to take on Lee's case. As of Friday, jail officials still had not turned over Lee's medical records that were requested Feb. 22, the lawyer said.

Raybin said he also has been contacted by other prisoners alleging similar problems.

"The problem with prisoners suffering from diabetic comas occurs frequently," Raybin said. "It's too easy of a problem to solve. Simply put your arms around it and give them the insulin they need. This is not rocket science."

Other cases

Glen Lee is the third Metro Jail inmate recently whose case raises concerns about the quality of medical care. The others:

Ricky Douglas

Douglas died in custody Jan. 19. Four hours before that, he had asked a deputy for medical help that never arrived. In a recent report, the jail's health-care provider, Prison Health Services, found a number of mistakes in the care Douglas received. Sheriff's officials and health department officials have not released a final report on his death.

Paul Burton

Paul E. Burton III, 40, was hospitalized in a diabetic coma eight days before Douglas' death.

Burton's Nashville attorney David Raybin says the inmate went into a diabetic coma after the jail's staff failed to give him enough medicine. After he returned, hospital physicians ordered Burton's insulin level increased tenfold.