

Research Article

The State of Nutrition Education at US Medical Schools

Kelly M. Adams,¹ W. Scott Butsch,² and Martin Kohlmeier^{1,3}

¹Department of Nutrition, School of Medicine and Gillings School of Global Public Health, University of North Carolina at Chapel Hill, 800 Eastowne Drive, Suite 100, Chapel Hill, NC 27584, USA

²Harvard Medical School, Massachusetts General Hospital Wright Center, 50 Staniford Street, 4th Floor, Boston, MA 02114, USA

³UNC Nutrition Research Institute, 500 Laureate Way, Kannapolis, NC 28081, USA

Correspondence should be addressed to Martin Kohlmeier; mkohlmeier@unc.edu

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Purpose. To assess the state of nutrition education at US medical schools and compare it with recommended instructional targets. **Method.** We surveyed all 133 US medical schools with a four-year curriculum about the extent and type of required nutrition education during the 2012/13 academic year. **Results.** Responses came from 128 institutions (96% response rate). Most US medical schools (86/121, 71%) fail to provide the recommended minimum 25 hours of nutrition education; 43 (34%) provide less than half that much. Nutrition instruction is still largely confined to preclinical courses, with an average of 14.3 hours occurring in this context. Less than half of all schools report teaching any nutrition in clinical practice; practice accounts for an average of only 4.7 hours overall. Seven of the 8 schools reporting at least 40 hours of nutrition instruction provided integrated courses together with clinical practice sessions. **Conclusions.** Many US medical schools still fail to prepare future physicians for everyday nutrition challenges in clinical practice. It cannot be a realistic expectation for physicians to effectively address obesity, diabetes, metabolic syndrome, hospital malnutrition, and many other conditions as long as they are not taught during medical school and residency training how to recognize and treat the nutritional root causes.

1. Introduction

Poor nutrition contributes to the development of most chronic diseases and even some acute conditions. The ongoing obesity epidemic demands urgent attention from physicians, and they can make a difference in their daily clinical practice without compromising the delivery of their usual services [1–3]. There is an increasing recognition that malnutrition is common in hospitalized patients, that it promotes the development of pressure ulcers and prolongs hospitalization stays, and that it is a major contributor to poor outcomes with many medical procedures. Timely nutritional assessment of at-risk patients and initiation of determined countermeasures are often effective and save costs [4]. Ill-advised overfeeding, on the other hand, can put malnourished patients at acute risk due to refeeding syndrome [5]. In fact, there are few areas of medical practice that are completely isolated from nutritional links or influences.

Physicians must be prepared for the many diverse situations when solid nutrition knowledge and clinical nutrition skills can improve the likelihood of optimal health outcomes. Physicians shape clinical practice patterns, direct other healthcare staff, and allocate resources. They must be able to recognize the importance of nutritional problems and take the initiative to make nutrition a key part of their daily practice, such as routinely including nutrition assessment during history-taking and physical examination. Physicians are the ones who routinely see patients when they need nutritional guidance the most; they must be able to recognize the need for a nutrition consultation, set the stage by explaining the importance of action to the patient, and then refer the patient to the appropriate professionals, such as a registered dietitian nutritionist.

Physicians in the US are largely on their own when it comes to learning how to look for signs of nutrition problems, how to explain the significance of nutrition-related conditions and appropriate interventions, and how to refer patients

Nutrition Education In Us Medical Schools

United States Accounting Office (GAO)

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Nutrition Education in U.S. Medical Schools National Research Council, Division on Earth and Life Studies, Commission on Life Sciences, Food and Nutrition Board, Committee on Nutrition in Medical Education, 1985-02-01 As the general public has become more aware of advances in nutrition consumer demands for advice on matters of diet and disease have grown This book offers recommendations to upgrade what were found to be largely inadequate nutrition programs in U S medical schools in order that health professionals be better qualified to advise and treat their patients A comprehensive study of one third of American 4 year undergraduate medical schools provided information on the current status of nutrition programs at each school Conclusions were drawn and recommendations made from analysis of this gathered information Questions examined in this volume include Has medical education kept pace with advances in nutrition science Are medical students equipped to convey sound nutritional advice to their patients What strategies are needed to initiate and sustain adequate teaching of nutrition in medical schools

Nutrition Education in U.S. Medical Schools National Research Council (U.S.). Committee on Nutrition in Medical Education, 1985 Abstract An authoritative report to aid medical school administrators in ensuring the adequacy of nutrition education NE in medical school curricula presents the findings of a national survey by a special committee of the US National Research Council that concluded that medical school NE programs are largely inadequate to meet present and future demands of the medical profession The survey assessed the extent to which NE is incorporated in medical education the prevalence of medical schools teaching nutrition and the success and failure of NE programs provided in different categories of medical schools The major findings and recommendations of the committee are highlighted and an outline of NE core concepts that all medical schools should acquire is included Ancillary documentation and survey questionnaires are provided in 7 appendices

Nutrition Education in U. S. Medical Schools National Research Council, Committee on Nutrition in Medical Education, 1985-01-01 [Nutrition Education in U.S. Medical Schools](#) National Research Council, Division on Earth and Life Studies, Commission on Life Sciences, Food and Nutrition Board, Committee on Nutrition in Medical Education, 1985-02-01 As the general public has become more aware of advances in nutrition consumer demands for advice on matters of diet and disease have grown This book offers recommendations to upgrade what were found to be largely inadequate nutrition programs in U S medical schools in order that health professionals be better qualified to advise and treat their patients A comprehensive study of one third of American 4 year undergraduate medical schools provided information on the current status of nutrition programs at each school Conclusions were drawn and recommendations made from analysis of this gathered information Questions examined in this volume include Has medical education kept pace with advances in nutrition science Are medical students equipped to convey sound nutritional advice to their patients What strategies are needed to initiate and sustain adequate teaching of nutrition in medical schools

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for further research The core of the volume consists of strategies and actions targeted to sectors of society government the private sector the health professions the education community that have special responsibilities for encouraging and enabling consumers to eat better These recommendations form the basis for three principal strategies necessary to further the implementation of dietary recommendations in the United States *Promoting Health/preventing Disease* ,1989

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