

Nutrition Education is Lacking in Medical Schools

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ABSTRACT

Cancer, heart disease, diabetes and malpractice are all common in the United States. Does our healthcare system provide effective service to the people of this country? The purpose of this study was to compile the recent research on this question in the peer-reviewed literature. It is well established that nutrition plays a major role in long-term health. Most medical schools do not provide doctors with the amount of nutrition training recommended by the National Academy of Sciences. Today, how to educate doctors about nutrition is discussed frequently in nutrition journals. Contributors to nutrition journals are recommending how to improve the inadequacy of nutrition education in medical school.

INTRODUCTION

Right now 45% of Americans are consistently on a prescription drug [3]. The prescription drug industry is now approaching a worth of 100 billion dollars [3]. Going to the hospital is third leading cause of death in this country [3]. Some studies have shown that adverse drug reactions (ADR) account for up to 3.4% of hospital admissions [3] In 2002, 16,176 ADR's were reported 67% were coded as severe. This problem stems from the fact that doctors are taught to rely on "quick fixes" like prescriptions and surgery [3] If doctors were to focus on proper nutrition and preventative health care, we might not have such a problem. The National Academy of Sciences (NAS) recommends at least 25 hours of nutrition education in medical school [3]. Unfortunately, most schools do not enforce this recommendation. We are now faced with a health care system that costs 1.5 trillion dollars a year [3]

METHOD

This project served to synthesize two recent studies published in the American Journal of Clinical Nutrition. Both of these studies were conducted in recent years (2001-2006). The information gathered through these studies was combined with other credible sources to provide a concise explanation of the condition of nutrition education in medical schools.



FINDINGS

Study 1: Status of Nutrition Education in Medical Schools. By Kelly M. Adams, Karen C. Lindell, Martin Kohlmeier and Steven H. Zeisel. 2006 [1]

In a survey of 106 medical schools regarding the status of nutrition education, 93% said that the school provided nutrition instruction. In fact, 5% of the schools offered ONLY optional nutrition courses. 2% offered no instruction at their schools in nutrition. Among the schools that required nutrition education, the average time spent in class by the student was 23.9 (range: 2-70) hours. Only 41% of the schools provided the minimum NAS requirement of 25 hours of nutrition education. 18% of the schools required less than 10 hours of instruction. Most of the instruction occurred in the first and second years of medical school. 75% of instruction was not specifically designated as such. 88% of instructors reported need for more nutrition education at their schools.

Study 2: Predictors of Nutrition Counseling Behaviors and Attitudes in US Medical Students. By, Elsa H. Spencer, Erica Frank, Lisa K. Elon, Vicki S. Hertzberg, Mary K. Serdula and Deborah A. Galuska. 2006 [2]

Over a four-year period of time, 2316 medical students provided answers to surveys conducted by the research group. 970 students were successfully tracked the entire time. A large proportion of the students told researchers that they ate slightly less than 3 servings of fruit a day (2.7). But, as the years went on, these numbers dropped. Out of 970 students, 72% of freshmen were more likely to see nutrition education as an important part of their schooling when compared to students who were about to be oriented on a hospital ward (61%) or during their senior year (46%). 22% of seniors did not feel extensively trained in nutrition. Only 17% of people surveyed "usually/always counseled patients in nutrition. 16% of the same sample never/rarely counseled patients in nutrition. Primary care specialists were more likely to find nutrition counseling relevant.

Doctors were more likely to council patients in nutrition if they were female, consumed more fruits and vegetables, believed that primary prevention was effective against premature cardiovascular disease (CVD), or had personal physicians who had encouraged disease prevention [2].



DISCUSSION

Based on the information collected, it is obvious that nutrition education does not occur enough in medical schools. The first study deemed nutrition education in medical schools to "be inadequate". The nutrition education received is not directly contained in nutrition courses. Most schools do not follow the nutrition instruction requirements (25hr) of the National Association of Sciences. Doctors spend little time in classes focused on nutrition. Most doctors feel that their nutrition education was lacking. Nutrition instruction in medical school declines as the years go on. Students in medical school have a declining view of their nutrition education. Very few doctors actually counseled their patients in nutrition. Doctors that do focus on nutrition counseling in their practices are more likely to eat better diets.

CONCLUSION: The absence of comprehensive, high-quality nutrition education leads to misinformed doctors. These doctors rely on "quick fix" treatments like prescriptions and surgery instead of long-term disease prevention practices like nutrition.

REFERENCES

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