



ESPEN Congress Glasgow 2002

What Price Education?

Nutrition in the Medical Curriculum

Jörgen Nordenström



Nutrition in the medical curriculum

Jörgen Nordenström

Karolinska Institute, Stockholm, Sweden



Education - medical school



Doctors need to be able to:

- identify and characterise malnutrition
- identify patients at risk
- prevent and treat malnutrition
- educate and motivate patients



Morgan et al 1988

- 85% of medical students reported dissatisfaction with the amount of nutrition education
- 60% reported discontent with the quality

Akner et al 2001

- Only 42% obtained an acceptable test result



When ?

- **early**: preclinical studies
- **late**: during clinical years
- **through-out**: "strand"



How ?

- lectures
- small group teaching
- in the clinic
- special study modules
- individual projects



University of Pennsylvania:

- longitudinal "strand"
- core faculty group
- nutrition program director
- core curriculum for nutrition



Core curriculum

- Am. Medical Student Assoc.
list of 92 topics
- Feldman, 1995
list of nutrition topics in priority order
- Swedish Society of Medicine, 1995



Barriers to change

Winick (1993)

- within the professional realm of medicine
- within the system of medical education
- in practise

faculty resistance to change

"nutrition is not clinically relevant"

absence of routine nutritional assessment in the clinical setting

lack of innovative teaching tools

- PBL, case-based learning exercises
- CD, videotapes, www
- assessment methods, individual projects



Summary

- nutrition is a crucial component of health promotion and disease
- nutrition education has received inadequate attention
- a "core curriculum" in nutrition should be available in all medical schools
- use creative pedagogical strategies
- faculty development programs are important