



Background

The role of nutrition in the onset of chronic disease and improvement of patient outcomes has become increasingly recognized in the medical field. However, medical school curriculums continue to lack nutrition education.¹ This presents a significant issue as physicians are the primary face of the U.S. healthcare system, yet it is not common practice for them to incorporate nutrition or nutrition-based referrals in treatment. The Registered Dietitian (RD) provides medical nutrition therapy (MNT) for a variety of diseases and conditions, including but not limited to Type 2 diabetes mellitus, heart disease, chronic kidney disease, gastrointestinal disorders, food allergies and intolerances, and cancer. MNT, as outlined in the Scope and Standards of Practice for RDNs, also involves collaboration with other health professionals as members of an interprofessional team in order to coordinate patient care.²

Objective

Evaluate current understanding and perception of the role of the Registered Dietitian/Registered Dietitian Nutritionist (RD/RDN) in healthcare among undergraduate pre-health students at Texas Christian University.

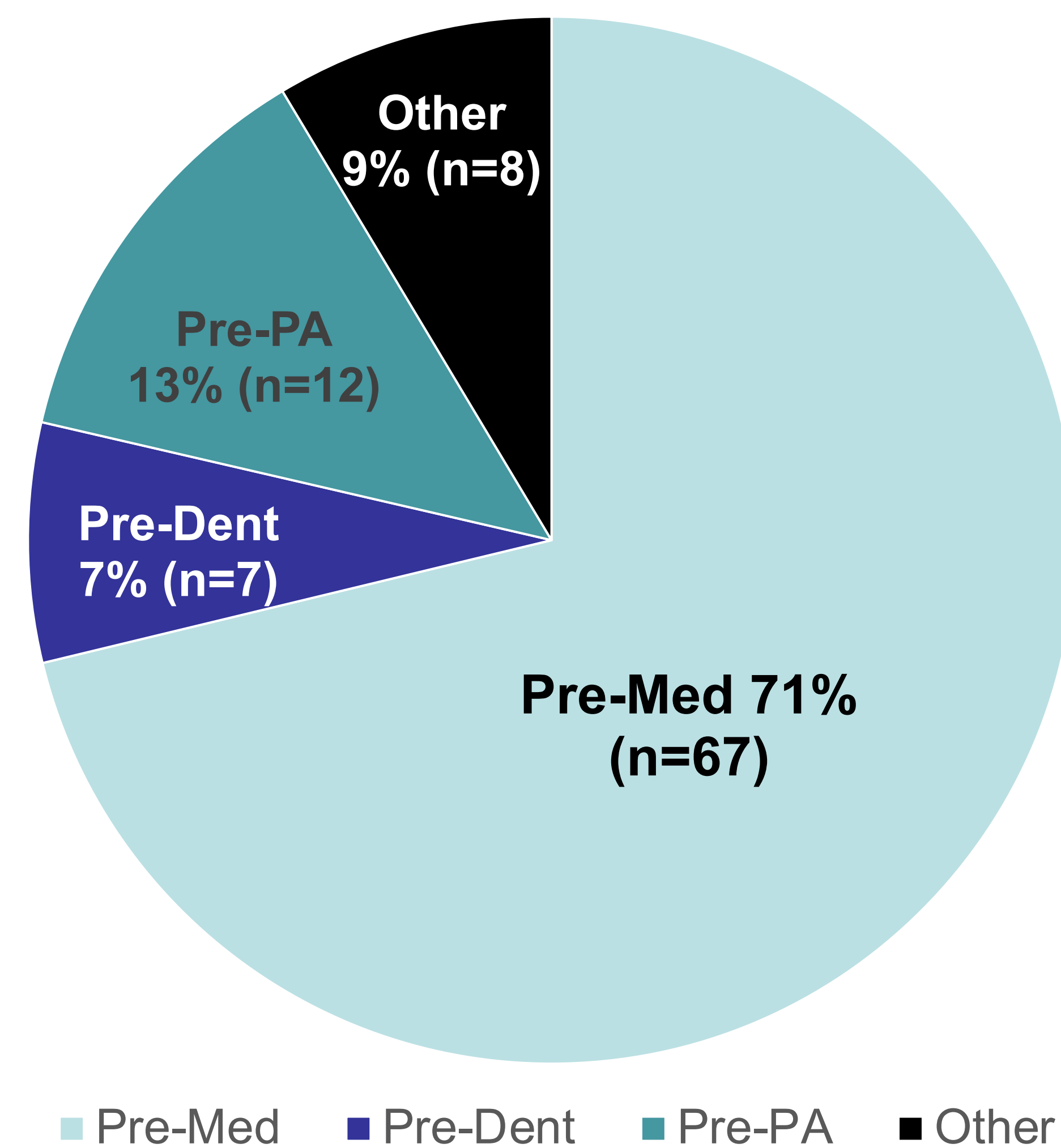
Methods

In this cross-sectional study, participants completed a one-time online survey. The survey included demographic questions and opinions regarding the importance of the RD/RDN from the perspective of current TCU pre-health students ≥ 18 years of age. Data were coded into and analyzed using SPSS 29. This study was approved by the TCU IRB and was supported by a TCU College of Science and Engineering Research (SERC) grant.

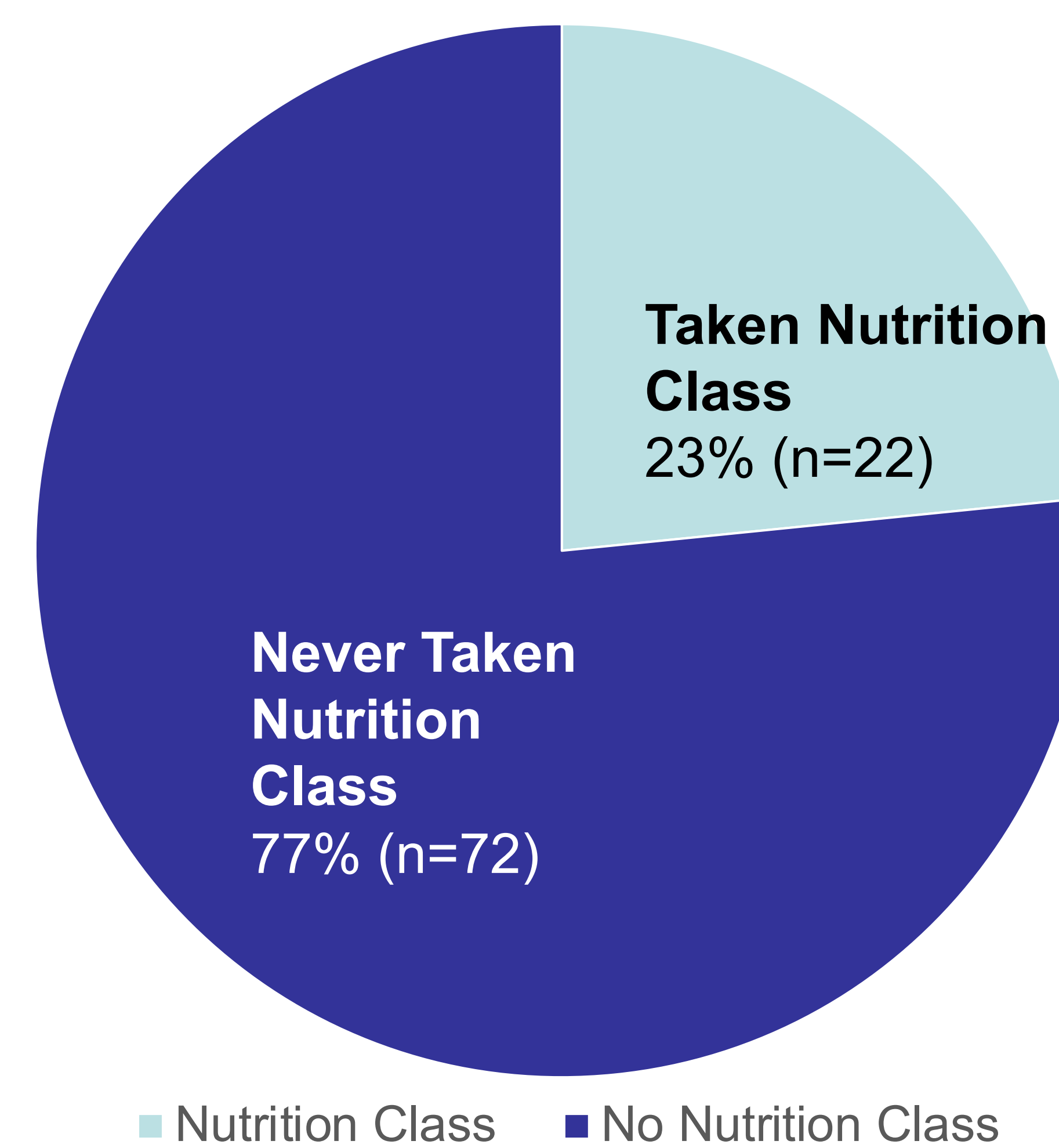
Results

The majority of participants were white (78%, n=73), non-Hispanic (81%, n=76), and were female (84%, n=79) with a mean age of 20.5 \pm 2.13 years (range: 18-30). Of the 94 participants, 23% (n=22) had taken a nutrition class. Over 55% (n=52) reported that RD/RDN would be important in the care of individuals with heart disease, diabetes, obesity, stroke, cancer, chronic kidney disease, Parkinson's Disease, Crohn's Disease, irritable bowel syndrome, eating disorders, and ulcerative colitis. Approximately 83% (n=78) of participants reported that they have never met with an RD/RDN for nutrition counseling. The top three diseases that participants thought were most relevant/important for the involvement of an RD/RDN are heart disease, diabetes, and obesity.

Distribution of Pre-Health Tracks among Participants



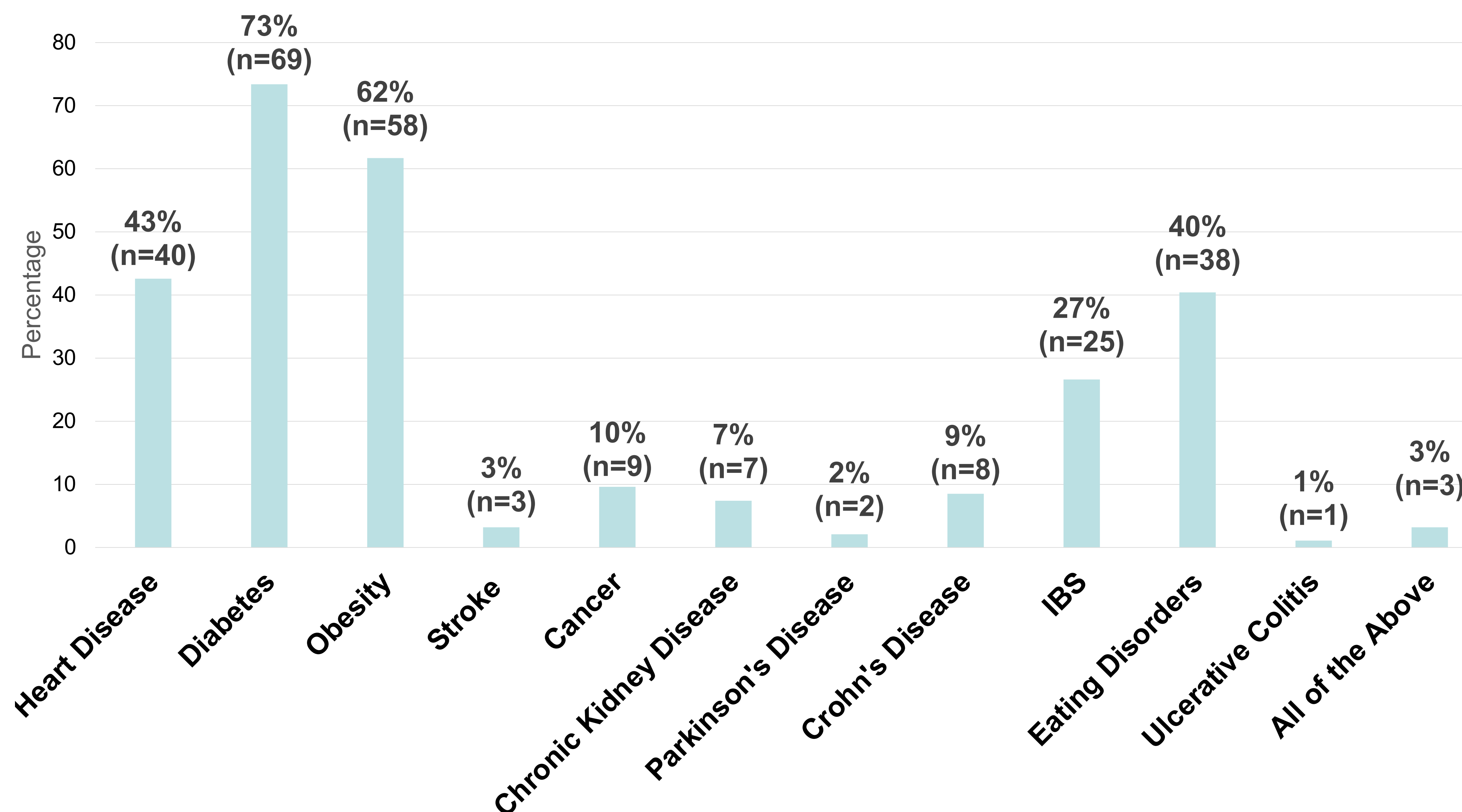
Pre-Health Participants' Prior Nutrition Education



Participants' Chosen Methods of Nutrition Intervention

Disease/Condition	Refer to RD/RDN	Printed Handout	Educate Patient	Recommend Source
Obesity	66% (n=62)	4% (n=4)	10% (n=9)	12% (n=11)
Parkinson's Disease	33% (n=31)	13% (n=12)	17% (n=16)	28% (n=26)
Celiac Disease	64% (n=60)	9% (n=8)	4% (n=4)	14% (n=13)
Heart Disease	55% (n=52)	12% (n=11)	5% (n=5)	17% (n=16)
Cancer	48% (n=45)	13% (n=12)	11% (n=10)	18% (n=17)
Chronic Kidney Disease	53% (n=50)	13% (n=12)	11% (n=10)	15% (n=14)
Diabetes	77% (n=72)	5% (n=5)	3% (n=3)	6% (n=6)
Stroke	35% (n=33)	16% (n=15)	20% (n=19)	20% (n=20)
Crohn's Disease	64% (n=60)	9% (n=8)	4% (n=4)	13% (n=12)
IBS	69% (n=65)	10% (n=9)	4% (n=4)	9% (n=8)
Eating Disorders	85% (n=80)	1% (n=1)	3% (n=3)	2% (n=2)
Ulcerative Colitis	60% (n=56)	12% (n=11)	3% (n=3)	17% (n=16)

Diseases Participants Reported as Most Relevant for Involvement from an RD/RDN



Conclusion

There is a lack of knowledge amongst the undergraduate pre-health population regarding the extent of a RD/RDN's capacity to provide medical nutrition therapy for common chronic diseases in the U.S. More nutrition education starting from the undergraduate level would provide a significant benefit for future healthcare providers and potentially improve patient care outcomes. It is imperative to promote the importance of nutrition care and establish the role of RDs/RDNs as a standard presence in patient care and on interdisciplinary health care teams. Increasing recognition of RD/RDN knowledge and skills will help to further elevate the profession and promote the likelihood of referrals by other healthcare professionals to improve patient care.

References

1. Kris-Etherton PM, Akabas SR, Bales CW, et al. The need to advance nutrition education in the training of health care professionals and recommended research to evaluate implementation and effectiveness. *The American Journal of Clinical Nutrition*. 2014;99(5):1153-1166S. doi:<https://doi.org/10.3945/ajcn.113.073502>
2. Sowards DB, Hui K, Gilmore CJ, et al. Commission on Dietetic Registration. Revised 2024 Scope and Standards of Practice for the Registered Dietitian Nutritionist. Available at: <https://www.cdrnet.org/scope>.