

Nutrition Education at UMN Medical School

common grounds
WORKING ACROSS DISCIPLINES

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Problem

MN deaths from modifiable chronic disease: cancer, stroke, diabetes and heart disease

27% Medical schools that teach the recommended hours of nutrition content

14% trained to counsel patients about nutrition for modifiable chronic diseases

National Med Ed Nutrition Hours

- Hours of nutrition content taught at UMN Medical School (SMP)
- Average hours of nutrition content taught in Medical School
- Recommended hours of nutrition content in Medical School
- Hours of nutrition we believe is necessary to reach competency and positive patient outcomes

Methods

- Literature review: national nutrition
 education practices and findings
- Survey: Current medical students
- Focus group: Food Matters students
- •Informational interviews: Medical Schools
- •Meetings: Kate Shafto, MD; Allison Dostal, PhD, RD; Timothy Harlan, MD, FACP



- "...Experiential learning methods are shown to transfer directly to **improved** patient care practices and better patient outcomes..."
- McGaghie, et. al

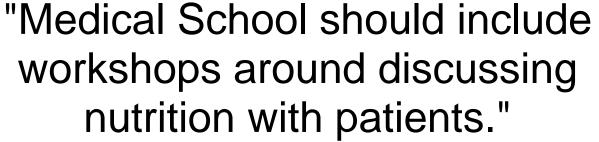
"We find that medical students who have been through our [culinary medicine] program are 2 ½ to 3 times as likely to understand these concepts and talk about them with their patients." - Dr. Harlan, Goldring Center of Culinary Medicine (Tulane University)

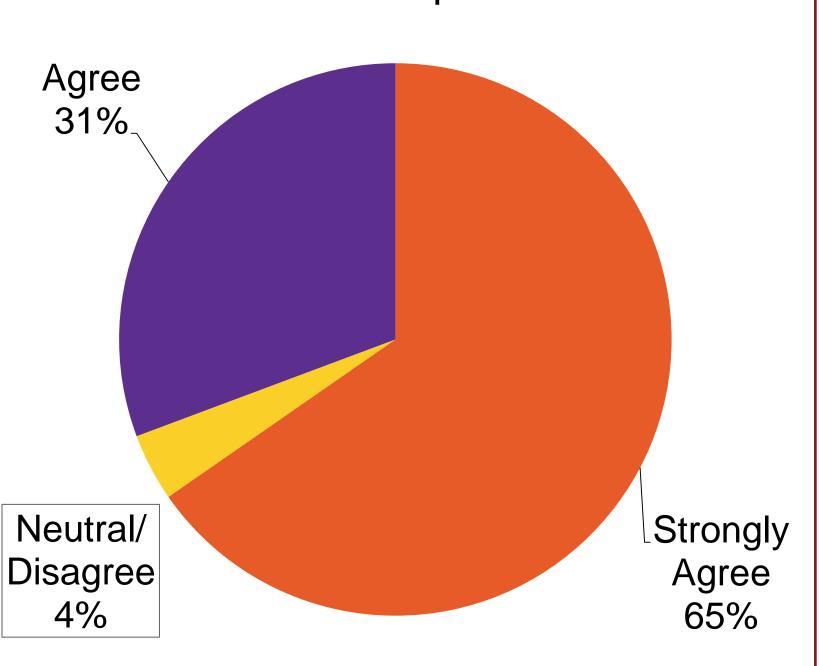
Key Interventions

Presentation to Medical Education Steering Council included:

- •Make the Food Matters course accessible and affordable for more medical students (hands-on cooking, nutrition and wellness)
- Add nutrition into interprofessional programs: FIPCC or Community Teacher
- •Add clinical nutrition into the medical school curriculum (increasing content value, not hours), such as a culinary medicine ECM workshop or clinical dyads in SMP or HHD courses

MS1 Survey Results





Challenges

- •UMN Medical School needs to reduce overall content hours, so they are not currently open to adding new learning opportunities to the curriculum
- •Unclear where funding or space would be for culinary medicine

Future Steps

- •Change Food Matters to an INMD course
- Arrange a culinary medicine grand rounds event
- •Continue lobbying medical school administration to deliver nutrition in a more meaningful manner

•Shafto, K. V., Breen, J., Decker, D. (2016, September/October), Reimagining nutrition education in a teaching kitchen: findings from a pilot study. Minnesota Medicine. 44-45 •Eisenberg, D., Burgess, J. (2015). Nutrition education in an era of obesity and diabetes: thinking outside the box. Academic Medicine, 90(7). 854-860.

•McGaghie, W. C., Issenberg, S. B., Cohen, E. R., Barsuk, J. H., Wayne, D. B. (2011). Does simulation-based medical education with deliberate practice yield better results than traditional clinical education? a meta-analytic comparative review of the evidence. Academic Medicine, 86. 706-711.