

Review of: "How Competent are Health Professionals in Delivering Nutrition Education? A Cross-Sectional Study in Ebonyi State, Nigeria"

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Potential competing interests: No potential competing interests to declare.

The present article studies the competency of health professionals in nutrition education dissemination. The researchers must be commended on the topic of survey as it is of utmost importance. The study was conducted meticulously with robust methodology. However, the following few points must be addressed.

1. Nutrition is a specialized area of expertise and require certain education, knowledge and experience to disseminate or advice the same for patients or customers. This role is primarily with the designated professionals - Nutritionists or Dietitians. It is not expected that a doctor or nurse or physiotherapist or a dentist would provide a nutritional counselling to the patient; but it is the role of a dietitian in the hospital setting as it is their primary responsibility. Why do the authors perceive that the other professionals must be oriented towards nutrition education? Doesn't it decrease the credibility of a dietitian? I disagree to the understanding that all the health care professionals must have the knowledge related to nutrition. Only Dietitians or Nutritionists who acquire the education and skills should be providing the nutrition education to the patients.
2. The introduction seems vague. Rather than highlighting the importance of nutrition, the authors can emphasize on the role of nutrition education and its impact on the quality of life of the patients.
3. The statement "Respondents who were physiotherapists were 17 times more likely to demonstrate competency in nutrition education compared to dietitians." in the discussion section states that physiotherapists are more competent than the dietitians. How does a profession with zero relation with nutrition can be more competent. Please explain.
4. Although the researches have applied robust methodology in screening and selecting the subjects, the groups such as dietitian and dentist (n=4) are incomparable to the number of nurses (n=249) in the study. How can the statistical analysis be conducted in this group of such varied numbers?
5. Can the authors explain why only those parameters have been selected as predictors of health professionals competency in nutrition education?
6. The point mentioned in #4 must be provided as a limitation to the study.
7. Conclusion section: "There is a need for emphasis on nutrition and nutrition education in the respective training schools of health professionals." Again, why should all the health care professionals (apart from dietitians and nutritionists) receive this training? Doesn't it impact the actual professionals in the field?

