



**TESTIMONY OF THE INTERNATIONAL & AMERICAN ASSOCIATIONS OF
CLINICAL NUTRITIONISTS
BEFORE THE MICHIGAN BOARD OF DIETETICS & NUTRITION
REGARDING DIETITIAN AND NUTRITION LICENSING**

June 22, 2010

I. Introduction

Thank you for the opportunity to provide testimony today. The purpose of my testimony is to clarify:

The Difference Between Dietitians and Nutritionists

There seems to be a general misunderstanding about the terms dietitian and nutritionist. Dietetic bills create the mistaken impression that the differences are negligible and that the titles and professions of dietitians and nutritionists are interchangeable. This is not true! And it is inappropriate, misleading and unethical. The fields of dietetics and nutrition are significantly different ideologically, educationally and clinically.

Historical Evolution

The Fields of Dietetics

Organized in the early 1900's following the establishment of medical boards in the 1890's, formed to provide food service management (i.e. kitchen management) and dietary planning in institutions, specializing in those with medical settings, primarily hospitals and nursing homes, and expanding into schools and prisons.

The science base of dietetics is the amount of calories, and carbohydrates, protein and fat content of diets. Dietetics established this protocol before vitamins were discovered.

Dietetic education originated as a home economics program and their programs continued to be accredited by the American Home Economics Association through the mid-70's. Now as baccalaureate degree programs accredited by the ADA (American Dietetics Association), the primary content of the education and testing is still institutional food service and management, with the nutrition component the minority (40% of the exam).

The Field of Nutrition

Originated in the 1950's. (Before the discovery of vitamins there was no field of nutrition.) Formed to provide clinical research and individual patient care based upon the more complex science of food properties established with the discovery of vitamins.

The science base of nutrition is utilizing the bio-nutrient properties discovered in foods for maximum health and disease prevention. Nutritionists may employ any of a wide range specific healing properties, homeopathic remedies, fasting and detoxification methods, and specific dietary practices of ancient tradition and other cultures.

Nutrition education varies considerably, as evidenced by the four independent nutritionist certification boards, all requiring at least 18 hours in nutrition.

Current Clinical Practice Approaches

Dietitians

*have a policy that there is no such thing as a good or bad food. They endorse white refined sugar, egg beaters (fake eggs), Ensure, McDonald's meals, and chemical and bioengineered additives including MSG and rBGH bovine growth hormone.

*are extremely cautious in recommending supplementation, and in the circumstances when their policy does allow for this, it is limited to the RDA (recommended daily allowance suggested by the US govt.)

Nutritionists

*recognize the positive and negative effects of different foods, such as the type of fat content, amount of processing/refinement, and chemical properties and additives, including as they relate to clinical conditions.

*utilize current bio-nutrient research to recommend diets and/or supplements appropriate for individual's specific condition.

Examination Preparation

An excellent way to illustrate the difference between Dietitians and Nutritionists is by the test question categories used by their certification boards to evaluate skills.

Registered Dietitian Certification

Majority of questions (60%) are on non-science topics, such as:

1. Purchase of kitchen equipment and its placement for efficient operation.
2. Institutional cooking and food preparation techniques
3. Inventory control and buying practices
4. Labor management, time management, etc.
5. Economics
6. Government programs such as food stamps, surplus, etc

Nutritionist Certification

Majority of questions (over 90%) are on nutrition science topics such as:

1. Human anatomy and physiology
2. Disease states
3. Metabolic pathways
4. Interpretation of blood and urine analysis as it pertains to nutritional status
5. Drug and nutrient interactions
6. Vitamin, mineral, amino acid, and dietary and herbal therapies

Summary

These two fields originated at different times to provide different services based upon a different scientific basis. It is true that some similarities have developed over time, as some of the modern nutrition science is being incorporated into the dietetic education and practice. We encourage more of these changes, as more advanced nutrition therapies and dietary options are still sorely needed in our hospitals, nursing homes, schools and prisons.

We believe that to adequately protect the health of the people of Michigan and their freedom of choice, the people should have the right to choose their form of nutritional therapy from a variety of professionals with different approaches, whether in the field of nutrition or in the field of dietetics.

Our position also is that we believe Public Act 333 of 2006 is exclusive and should be amended. We join MNA to propose rules that are faithful to the intent of the current statute, and create a competitively-neutral, minimum set of standards that preserve professional diversity and consumer choice as the Legislature and Governor directed.

We join today to present, in good faith, a proposal for the requirements for a license that comply with MCL 333.18358 but do not discriminate against or unfairly advantage any segment of the profession under Public Act 333.

Thank you.

Kevin P. Henry
IAACN Executive Director