

# Effectiveness of Medical Nutrition Therapy

Medical Nutrition Therapy (MNT) is an evidence-based application of the Nutrition Care Process that can include nutrition assessment/reassessment, nutrition diagnosis, nutrition intervention and nutrition monitoring and evaluation. MNT is provided by a registered dietitian nutritionist (RDN) with the goal of preventing, delaying or managing diseases or conditions.

The Medical Nutrition Therapy Act would provide coverage under Medicare Part B for MNT for a variety of chronic conditions beyond diabetes and renal disease, which are already covered. *The Effectiveness of Medical Nutrition Therapy in Prevention and Treatment of Chronic Disease: A Position Paper of the Academy of Nutrition and Dietetics<sup>i</sup>* provided overall conclusions of MNT effectiveness from systematic reviews (2017–2024) examining the impact of medical nutrition therapy interventions provided by registered dietitian nutritionists.

The following is a compilation of evidence that shows MNT to be clinically effective in treating or managing the new conditions specified in the bill, including diabetes and renal disease which are partially covered under Medicare Part B.

## **Cancer<sup>ii,iii,iv,v</sup>**

In adults with head and neck cancer, MNT likely improves quality of life (QoL), nutritional status, percent weight change and unplanned hospital visits compared with no MNT.

MNT may improve dietary intake in some settings and may improve weight outcomes in cancer survivors.

## **Cardiovascular Risk Factors<sup>vi,vii,viii</sup>**

In adults with cardiovascular risk factors, MNT likely decreases blood pressure (BP) and weight compared with no MNT. In adults with dyslipidemia, MNT likely decreases total and low-density lipoprotein cholesterol and triglyceride concentrations.

## **Celiac Disease<sup>ix</sup>**

In adults with celiac disease, MNT may improve QoL and gastrointestinal symptoms.

## **Chronic Kidney Disease (CKD)<sup>x,xi</sup>**

In adults with CKD, MNT interventions aiming to reduce BP likely do so compared with no MNT.

In adults with CKD, MNT interventions aiming to reduce serum phosphate may do so compared with no MNT.

## **Chronic Obstructive Pulmonary Disease (COPD)<sup>xii</sup>**

In adults with COPD, MNT likely improves QoL, weight and body composition, but has an unclear effect on lung function compared with no MNT.

## **Eating Disorders<sup>xiii</sup>**

In individuals with eating disorders, MNT may improve eating disorder psychopathology and behaviors but has an uncertain effect on weight.

## **Hypertension or Pre-Hypertension<sup>xiv,xv</sup>**

In adults with hypertension or pre-hypertension, MNT likely reduces BP, risk of stroke, weight and body mass index (BMI) compared with no MNT.

In adults with hypertension or pre-hypertension, MNT may reduce waist circumference and hypertension incidence for those with pre-hypertension compared with no MNT.

## **Malnutrition<sup>xvi, xvii,xviii</sup>**

In older adults with malnutrition discharged from acute care, MNT likely improves weight and BMI compared with no MNT.

In adults with malnutrition, MNT may improve mortality, length of stay and cost-savings.

## **Overweight and Obesity<sup>xix,xx,xxi</sup>**

In adults with overweight or obesity, MNT likely improves weight loss, BMI, systolic BP and mental QoL compared with no MNT.

In adults with overweight or obesity, MNT may improve diastolic BP, physical QoL and may be cost-effective compared with no MNT.

## **Pre-Diabetes<sup>xxii</sup>**

In adults with pre-diabetes, MNT likely reduces fasting blood glucose, waist circumference, BP and total cholesterol concentrations compared with no MNT.

In adults with pre-diabetes, MNT may improve HbA1c, BMI and low-density and high-density lipoprotein cholesterol concentrations compared with no MNT.

## **Type 1 DM (Adults)<sup>xxiii</sup>**

In adults with type 1 DM, MNT decreases HbA1c and glucose concentrations, but likely has mixed effects on anthropometric and lipid profile outcomes and BP.

## **Type 2 DM<sup>xxiv,xxv</sup>**

In adults with type 2 DM, MNT likely reduces HbA1c and glucose concentrations but may have mixed effects on anthropometric and lipid profile outcomes and BP compared with no MNT.

**For more information from the Academy of Nutrition and Dietetics, please contact [govaffairs@eatright.org](mailto:govaffairs@eatright.org).**

## References

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