

Contents lists available at [ScienceDirect](#)

Clinical Nutrition ESPEN

journal homepage: <http://www.clinicalnutritionespen.com>

Letter to the Editor

Response to “Is the definition of malnutrition a Sisyphean task?”



We thank Diana Cardenas for the interest in our work and willingness to discuss this important topic further. In the response titled “Is the definition of malnutrition a Sisyphean task?” Dr Cardenas raises excellent discussion points, while ultimately reinforcing the importance of developing one clear, objective, internationally accepted consensus definition for malnutrition.

Dr Cardenas's assertion that malnutrition is, in essence, what defines clinical nutrition is eloquently stated and essential to acknowledge in any conversation surrounding malnutrition. Because the ability to identify malnutrition is a core component of a clinical nutrition practitioner's job, there is an inherent resistance to the idea that malnutrition may be poorly defined (Dr Cardenas may have identified a blind-spot that has been at the core of slow progress). An appreciation for this resistance is important to acknowledge before a constructive conversation can take place.

We also completely agree with Dr Cardenas's assertions that the first step in advancing the definition of malnutrition is recognizing the complexity of the disease and further, that malnutrition cannot truly be defined without a definition for normal nutrition (which is, in all likelihood, a Sisyphean task). Where we diverge is how we are using the term malnutrition. This paper was written from a clinical standpoint and the emphasis was on “clinical malnutrition” vs

“malnutrition”. Its purpose wasn't to discuss the semantics of malnutrition (e.g. whether it is a disease or risk factor, what is “normal” nutrition, etc.) but rather, to encourage the development of a uniform definition for clinical malnutrition based on therapeutic response. Whether or not it is appropriate to term this malnutrition or categorize it as a disease or risk factor is secondary to the primary purpose: improving identification of individuals who would benefit clinically from nutrition intervention. Although these discussions are important to have, they were beyond the scope of this paper.

Conflict of interest

None declared.

Levi Teigen
 University of Minnesota, Department of Gastroenterology, Hepatology,
 and Nutrition, United States
 E-mail address: teige027@umn.edu.

19 October 2018