Heart Beets: Plant-Based Diets and Cardiovascular Health

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Introduction/Objective

Many clinical practice guidelines share a common theme of recommending plant forward diets to reduce cardiovascular disease, morbidity, and mortality. [1-3] Despite this, there is a gap in the education of health professionals regarding specific evidence supporting healthy plant-based diets and how to implement these interventions in the care of their patients.

The objective of this study is to assess provider knowledge regarding plant-based diets relating to cardiovascular health and their confidence in making recommendation to their patients.

Methods

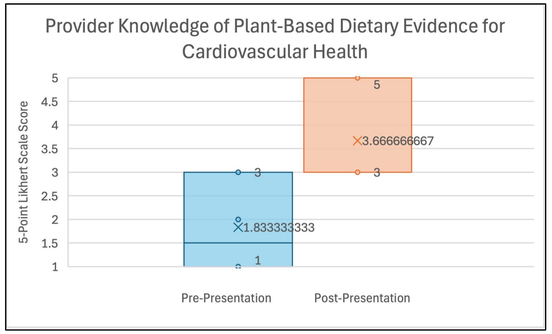
Ambulatory care providers attended a 15-minute presentation on the cardiovascular benefits of plant-based diets. Providers completed a pre- and post-presentation survey. Change in knowledge and confidence in recommending plant-based diets reported on a 5-point Likert scale (1: Not very to 5: Very) were analyzed with a Wilcoxon signed-rank test. Descriptive data was also collected. Surveys were conducted through Qualtrics.

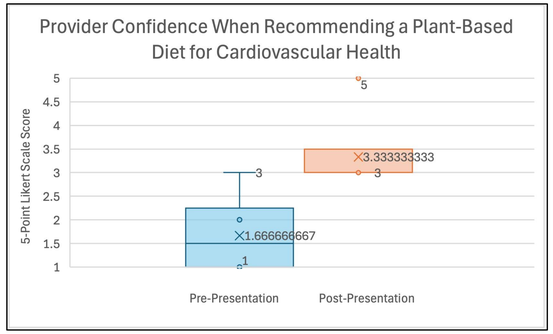
Results

Six participants completed the pre- and post-surveys. Mean knowledge scores increased from 1.6 before the intervention to 3.6 after the intervention, while mean confidence scores increased from 1.5 to 3.3. A Wilcoxon signed-rank test demonstrated a statistically significant difference between pre- and post-intervention scores ($W = 0$, $p < 0.05$). Additionally, all participants agreed that the presentation improved their knowledge and confidence in recommending a plant-based diet to patients.

Five participants reported receiving no training on the dietary impact on cardiovascular health during their professional education. Among the three participants who had received such training, two reported that it did not adequately prepare them to incorporate dietary recommendations into clinical practice.

Four participants had 6–10 years of experience in their current roles, and seven participants were pharmacists. Before the intervention, the most reported dietary recommendations provided to patients were the Mediterranean diet, the Dietary Approaches to Stop Hypertension (DASH) diet, and reduced sodium intake.





Discussion

The educational intervention was associated with statistically significant improvements in participants' knowledge of plant-based diets and confidence in recommending them to patients. All participants perceived the presentation as beneficial, suggesting focused educational programing may help ambulatory care providers translate guideline-supported dietary recommendations into clinical practice.

The findings highlight an important gap in professional education. Most participants reported receiving no formal training on the relationship between diet and cardiovascular health, and most of those who had received training did not feel adequately prepared to implement dietary recommendations in practice. Although participants commonly recommended the Mediterranean diet, DASH diet, and sodium reduction, additional education may help providers offer more specific, evidence-based guidance on healthy plant-forward dietary patterns.

These findings should be interpreted in the context of the study's small sample size, predominance of pharmacists, use of self-reported outcomes, and assessment immediately after a single presentation. These factors may limit generalizability and do not establish whether improvements were sustained or translated into changes in clinical practice or patient outcomes.

Conclusions

A focused educational presentation significantly improved ambulatory care providers' knowledge of plant-based diets and confidence in recommending them to patients. The limited formal training reported by participants highlights an important gap between cardiovascular guideline recommendations and provider preparedness to implement dietary interventions in practice. Incorporating evidence-based nutrition education into professional training and continuing education may better equip healthcare providers to deliver practical, guideline-directed dietary counseling.

References

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Questions?

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