

How to Recognise Nutrition Misinformation

Nutrition misinformation can sound scientific, caring and confident. A short pause to check the source, evidence and motive can protect your health, money and peace of mind.

What is nutrition misinformation?

Misinformation is inaccurate or misleading information shared without necessarily intending harm. Disinformation is deliberately created or spread to deceive. In everyday life, it may be impossible to know the intention, so focus on whether the claim is supported and safe.

Why it spreads

- Simple answers feel reassuring when symptoms or health decisions are complicated.
- Personal stories are memorable and emotionally powerful.
- Algorithms reward attention, certainty, fear and controversy.
- Scientific language can create authority even when used incorrectly.
- Selling a programme or product gives the claim a clear route to profit.
- Repeated messages begin to feel familiar and therefore true.

Not every disagreement is misinformation

Nutrition science develops, studies have limits and qualified professionals may interpret incomplete evidence differently. A trustworthy source explains uncertainty, population differences and what would change their conclusion. Misinformation often removes that nuance.

The three first checks

Source	Evidence	Motive
Who is speaking and what are their relevant qualifications?	Is the claim supported by more than a testimonial or one study?	Are they selling, recruiting, collecting data or building attention?

Red Flags in Nutrition Claims

One red flag does not prove a claim is false, but several together are a strong reason to pause.

The promise is dramatic

- Rapid, effortless or guaranteed results
- One food, ingredient or supplement claimed to cure many unrelated problems
- Claims that everybody has the same hidden cause
- Detox, cleanse or “reset” language without a clear medical meaning
- Before-and-after images offered instead of evidence

Fear replaces explanation

- Everyday foods called toxic or poisonous without dose or context
- Urgency: buy now, act before it is too late, or protect your family immediately

- Disagreement presented as proof of corruption or conspiracy
- Normal symptoms interpreted as evidence of severe damage

The evidence is weak or distorted

- A testimonial is used as if it proves cause and effect.
- An animal, laboratory or very small study is treated as settled advice for everyone.
- Only relative risk is reported, without the actual numbers.
- A paper is linked but does not support the headline.
- Associations are described as proof that one thing caused another.
- Limitations and conflicting findings are omitted.

The source cannot be checked

- No named author, date, references or relevant qualifications
- A title such as “doctor” used outside the person’s field
- “Nutritionist” presented as if it always means the same regulated qualification
- Screenshots of studies with no title, journal or link
- Claims attributed vaguely to experts, research or ancient wisdom

The sales path

Be cautious when the problem, test and treatment are all controlled by the same seller. A conflict of interest does not automatically make information false, but it should be declared and the evidence should be checkable elsewhere.

How to Check a Claim Step by Step

You do not need to become a scientist. The aim is to slow the decision down enough to find reliable context.

1. Write the exact claim

Separate the claim from the story around it. “This product reverses diabetes” is different from “someone felt more energetic after using it”. Precise wording makes checking possible.

2. Identify the source

Look for a named author, relevant qualifications, organisation, publication date and correction policy. In the UK, registered dietitians can be checked through the Health and Care Professions Council. Registered nutritionists may be checked through the Association for Nutrition.

3. Find the original evidence

Follow links past the headline. Check whether the source is a full study, a press release, an opinion piece or another post repeating the claim. Look for the people studied, comparison group, length, outcome and limitations.

4. Look for the wider evidence

One study rarely settles a nutrition question. Guidance from the NHS, professional bodies and systematic reviews weighs a broader evidence base. Check whether other reputable organisations reach a similar conclusion.

5. Consider relevance

- Were humans studied, and were they similar to the people receiving the advice?
- Was the amount realistic?
- Was the outcome meaningful to health or only a laboratory marker?
- How long did the study last?

- Could another difference explain the result?

6. Check the language

Reliable communication distinguishes may, is associated with and causes. It gives absolute numbers where possible and avoids claiming certainty that the evidence cannot provide.

7. Check the risk of acting

Changing one meal is different from stopping medication, eliminating major food groups or buying an unregulated product. The higher the risk, the stronger the evidence and professional support should be.

Influencers, Adverts, Tests and Supplements

Online health content may blend personal experience, education and advertising so closely that the commercial purpose is easy to miss.

Influencers and affiliate links

Look for clear advertising labels, gifted products, discount codes, affiliate links and brand relationships. Popularity, appearance and confidence are not health qualifications. A disclaimer saying “not medical advice” does not make unsafe advice responsible.

Personal tests

Be cautious when a commercial test claims to diagnose broad food intolerance, hormone imbalance, toxicity or deficiency without accepted clinical methods. Ask what the test measures, how accurately it identifies the condition, whether independent guidelines recommend it and how results change treatment.

Supplements

“Natural” does not mean risk-free. Supplements can cause side effects, contain variable amounts and interact with medicines. High-dose or multiple products can increase risk. Speak to a pharmacist, GP or dietitian when you take medication, are pregnant, have a condition or are considering significant doses.

Claims and regulation

Advertising rules restrict health and nutrition claims, but a post being visible does not mean it has been approved. Content may come from another country, be removed only after complaints or avoid direct wording through implication.

What a trustworthy communicator does

- Names qualifications accurately and stays within their scope
- Links to original or authoritative sources
- Explains uncertainty, limitations and who advice may not suit
- Separates personal experience from evidence
- Discloses payment, sponsorship and conflicts
- Encourages appropriate medical care
- Corrects errors openly

Extra care with restrictive diets

Advice to remove several foods can be especially harmful for children, pregnancy, older adults, people with eating disorders or ARFID, and anyone whose intake is already limited. Do not remove medically necessary safe foods because of a social-media claim.

Your Nutrition Claim Check

Use this worksheet before you share, buy or make a major change.

The claim

- What exactly is being promised?
- Who is the claim meant for?
- What action am I being encouraged to take?

The source

- Is the author named?
- Are their qualifications relevant and verifiable?
- Is the information dated and updated?
- Can I find an editorial or correction process?

The evidence

- Are original sources linked?
- Is there more than one study?
- Does the evidence match the headline?
- Are limitations, uncertainty and possible harms explained?
- Do independent trusted sources broadly agree?

The motive

- Is money, data, recruitment or attention involved?
- Is advertising clearly labelled?
- Does the person profit from both identifying and treating the problem?
- Would they still benefit if I decide not to act?

My decision

- Low risk: I can wait and check more.
- Moderate risk: I will discuss it with an appropriate professional.
- High risk: I will not stop treatment, remove major foods or take a product without clinical advice.
- I can choose “not enough reliable information” rather than yes or no.

A message from Maggie

You should not have to become frightened before somebody offers you help.

Nutrition misinformation often reaches people when they are already tired, unwell or desperate for an answer. A confident promise can feel like hope. If you have believed or bought something that did not help, that does not make you foolish. These messages are designed to feel persuasive.

Pause without blaming yourself. Ask who is speaking, what evidence supports the claim and what they gain if you believe it. If a change could affect medication, allergies, safe foods or an already limited diet, seek qualified advice first.

You are allowed to take time. You are allowed to ask for the original source. You are allowed to say that the evidence is not clear enough. Protecting yourself is not being negative; it is informed care.

Maggie Learoyd
Space to Breathe Therapy

Reliable places to begin

NHS health and nutrition information - <https://www.nhs.uk/> | British Dietetic Association - <https://www.bda.uk.com/> | HCPC register - <https://www.hcpc-uk.org/check-the-register/> | Association for Nutrition register - <https://www.associationfornutrition.org/>

Advertising Standards Authority - <https://www.asa.org.uk/> | Medicines and Healthcare products Regulatory Agency - <https://www.gov.uk/government/organisations/medicines-and-healthcare-products-regulatory-agency>

Suggested reading: Bad Science - Ben Goldacre; The Angry Chef - Anthony Warner; Food Isn't Medicine - Joshua Wolrich; Calling Bullshit - Carl Bergstrom and Jevin West.

This resource provides general information and does not replace medical or dietetic advice.

A simple claim investigation record

Keep a brief record when a claim matters enough to affect your health or spending. This reduces the pull of urgency and helps you explain your decision to a professional.

- Date and place I saw the claim...
- Exact words used...
- Named author and verified qualification...
- Product, service or link being promoted...
- Original evidence located...
- What the evidence actually found...
- Important limitations or people excluded...
- What independent trusted sources say...
- Possible risks of acting or waiting...
- My decision and who I will ask...

If you have already shared something

You can correct it without shame. Remove or edit the post where possible, tell the person what you have since learned, and link to a more reliable source. A clear correction protects trust more than quietly leaving a harmful claim in place.

Try: "I shared this before checking it carefully. I have since found that the evidence does not support the original claim, so I am correcting it here."

For supporters

Avoid mocking somebody for believing a claim. Ask what problem they hoped it would solve and validate that need without validating unsafe information. Offer to check the source together. Fear, humiliation and argument can make people hold more tightly to a promise that has given them hope.

Remember

Reliable information can still be imperfect, and a polished website can still be wrong. The aim is not absolute certainty. It is a safer decision based on transparent evidence, appropriate expertise and a realistic understanding of benefit and harm.