

Role of nutritional psychiatry as an unorthodox approach to tackle the global burden of mental diseases

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Madam, mental health problems are considered a taboo in developing countries like Pakistan. According to the World Health Organization, depression will supersede hypertension, cancer and cardiovascular diseases as the most dominant global disease by 2030.¹ Despite the alarming statistics, our health system is not completely equipped with policies to meet the needs of the hour. The bleak situation of mental health problems in Pakistan reflects presence of only one psychiatrist for every 1000 patients thus putting mental health as the most neglected problem in the country.² Evidences suggest aggravation of certain neuropsychiatric conditions as a result of poor dietary choices. However, the underlying causal relationships are complex.

Researchers have introduced Nutritional psychiatry as an alternative approach. This field supports the theory that the commonly consumed food not only impacts our physiology and physical appearance but is also critically important for mood regulation and wellbeing.

Psychiatrists treat mental disorders with an array of prescription drugs which present unwanted side effects on the metabolism of the body. It was found that, obesity - the current global health hazard has two co-morbidities i.e.; Alzheimer's disease and depression. This formulates the theory which states that vascular impairments may have a role in the development of psychiatric pathologies. Thus, suggesting that Alzheimer's disease, depression and other dementias are now potentially preventable with a healthy diet.³

There are several changes required in dietary patterns to make the mental diseases preventable.

Firstly, introduction of broad-spectrum micronutrients. Secondly, well-controlled clinical trials suggest a

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Table: Effective nutrients for certain mental disorders.

Mental Disorders	Proposed Treatments
Alzheimer's Disease, Dementia (Stage 1a and 1b), Depression, Schizophrenia.	Omega 3 Fatty Acids
Alzheimer's Disease, Depression and Mild Cognitive Impairment.	Cholesterol and Phospholipids
Behavioural deterioration, Dementia, Depression and Mild Cognitive Impairment.	Vitamin B: B6, B12, Folate and Niacin
Anxiety, Attention deficit, Autism, Cognitive decline, Bipolar disorder, Hyperactivity disorder and Schizophrenia.	Antioxidants: Vitamin A, C, E
EPA- Eicosapentaenoic acid.	

deficiency of neurotransmitters as the pathophysiological basis of depression. Randomized controlled trials suggest that 1.5 to 2g of EPA/day (Eicosapentaenoic acid) and 0.8mg of folate/day helps in mood elevation of depressed patients.⁵

Thus, keeping all the evidences in regards, the practitioners should be advised to educate patients regarding medical nutritional therapy and government level policies should be formulated to address the mental health problems from the avenue of nutritional psychiatry.

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