



# Important Aspect of Preventive Mental Health and Improved Dietary Habits

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## ABOUT THE STUDY

The average population in America and other developed nations frequently lacks essential vitamins, minerals, and omega-3 fatty acids; people with mental illnesses are particularly lacking in these nutrients. Studies have demonstrated that daily supplementation of essential nutrients often and successfully lessen patients' symptoms. Because amino acids are transformed into neurotransmitters that treat depression and other mental diseases, amino acid-containing supplements also lessen symptoms. According to newly available scientific evidence, this type of nutritional supplement therapy may be effective for treating conditions such as addiction, major depression, bipolar disorder, schizophrenia, anxiety disorders, eating disorders, and ADD/ADHD as well as autism.

On acute psychiatric wards, mood disorders (such as depression and bipolar disorder) are highly prevalent. It has long been recognised that low levels of neurotransmitters like serotonin, dopamine, noradrenaline, and GABA are related to depression. Tryptophan, tyrosine, phenylalanine, and methionine have all been shown in numerous trials to be effective in treating a variety of mood disorders, including depression. Serotonin is typically produced when tryptophan, a precursor to the neurotransmitter, is consumed by itself on an empty stomach. Tryptophan can thereby promote restful sleep, replenish serotonin levels in conditions of serotonin deficiency, and lessen depression.

Major depression is more common now that most cultures are consuming fewer omega-3 fatty acids from seafood and other sources. The two omega-3 fatty acids contained in fish oil, Eicosapentaenoic Acid (EPA), and Docosahexaenoic Acid (DHA), which the body changes into DHA, have been shown to have antidepressant benefits in humans. Neurotransmitters are involved in the majority of the hypothesised pathways, and some, of course, have more evidence to support them than others. For instance, the conversion of EPA into prostaglandins,

leukotrienes, and other brain-necessary molecules may be the cause of antidepressant effects.

Although it is well established that psychological stress raises levels of pro-inflammatory cytokines, the relationship between stress and inflammation appears to be reciprocal, with inflammation being implicated as a major risk factor for depressive disease. Increased oxidative stress is also linked to depressive diseases, and inflammation is accompanied by an accumulation of highly reactive oxygen species. Reduced systemic inflammation is linked to diets high in antioxidants, vitamins, minerals, and fibre. Conversely, Western-style diets and diets lacking in critical minerals like magnesium are linked to higher levels of systemic inflammation.

The trend in global habitual diets toward more refined carbohydrates is significant in several ways. High Glycemic Load (GL) diets are also linked to increased systemic inflammation, and hyperglycemia itself promotes an inflammatory state. Dietary elements that are particularly relevant to depressive disease, such as refined carbohydrates and saturated fats, have a negative effect on the production of neurotrophic factors. Therefore, it is conceivable to hypothesise that diet quality affects the onset and course of depressive illnesses through altering inflammatory, oxidative, and neurotrophic variables. These theories still need to be verified. But the majority of these theories are still untested.

Foods that are abundant in plants, minimally processed, in-season, and locally grown, as well as sweets made from nuts, concentrated sugars, or honey, are all part of the Mediterranean diet. Olive oil serves as the main source of dietary lipids. Dairy products are consumed in low to moderate amounts. Less than four eggs are consumed each week. Red meat is consumed infrequently. A diet following this pattern ensures a sufficient intake of nutrients that have been linked to a lower risk of developing a number of chronic diseases. The population's adherence to the Mediterranean diet pattern has been evaluated using a variety of scores or indices, and these patterns have been linked to a number of ailments that are nutrient-related.

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