Dietitians Support Mental Health

Promote • Prevent • Treat





The facts:

- 1 in 5 Canadians experience mental health problems, and all
 Canadians benefit from promotion of positive mental health^{1,2}
- People with chronic medical conditions are more likely to experience mental health issues, and those with mental illness are more likely to develop chronic health conditions³
- 1 in 8 Canadian households are food insecure. Food insecurity increases risk of mental health issues, and people with mental health conditions are more likely to be food insecure³

Dietitians promote wellness

- Evidence shows optimal nutrition promotes positive mental health³
- Dietitian-led programs in prenatal nutrition, breastfeeding support, and children's nutrition support lifelong healthy eating habits³
- Dietitians advocate for healthy food environments to support wellness where people live, work, and play

Healthy diets prevent mental health conditions

- A healthy diet reduces the risk of:
 - depression, anxiety, and other mood disorders⁴⁻⁶
 - dementia and cognitive decline⁷
- Dietitians translate the science of nutrition into advice everyone can use, and tailor it to individual circumstances

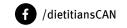
Dietitian treatment improves outcomes

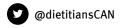
- Clients receiving individualized nutrition counselling from a dietitian have significantly reduced symptoms of depression⁴⁻⁶
- Dietitian-provided nutrition education and individualized treatment is important in recovery from substance abuse and addictions^{3,8,9}
- Shorter hospital stays and more effective rehabilitation for eating disorder patients is associated with more dietitian care^{10,11}
- Dietitians plan nutrition strategies for children with Autism Spectrum Disorder. Risk of nutrient deficiencies include food fixations and aversions which may be complicated by parental experimentation with restricted diets¹²⁻¹⁵
- Common side effects of psychiatric medications include weight gain, dyslipidemia, malnutrition.^{3,16} Dietitians help clients manage side effects to improve health and support medication adherence













References

- 1. Canadian Mental Health Association. Cohesive, Collaborative, Collective: Advancing Mental Health Promotion in Canada. May 2019. https://cmha.ca/wp-content/uploads/2019/05/MHP-Summary-Report-FINAL-EN.pdf
- 2. The Centre for Addiction and Mental Health. Mental Illness and Addiction: Facts and Stats. https://www.camh.ca/en/driving-change/the-crisis-is-real/mental-health-statistics
- 3. Dietitians of Canada. Promoting Mental Health through Healthy Eating and Nutritional Care. 2012. Available from: http://www.dietitians.ca
- 4. Tolkein K, Bradburn S, Murgatroyd C. Anti-inflammatory diet as a potential intervention for depressive disorders: A systemic review and meta-analysis Clin Nutr. 2019 Oct;38(5):2045-2052
- 5. Jaka FN, O'Neil A, Opie R, Itsiopoulos C, Cotton S, Mohebbi M, Castle D, Dash S, Mihalopoulos C, Chatteron ML, Brazionis L, Dean OM, Hodge AM, Berk M. A randomised controlled trial of dietary improvement for adults with major depression (the 'SMILES' trial). <u>BMC Med.</u> 2017 Jan 30;15(1):23.
- 6. Parletta N, Zarnowiecki D, Cho J, Wilson A, Bogomolova S, Villani A, Itsiopoulos C, Niyonsenga T, Blunden S, Meyer B, Segal L, Baune BT, O'Dea K. A Mediterranean-style dietary intervention supplemented with fish oil improves diet quality and mental health in people with depression: A randomized controlled trial (HELFIMED). Nutr Neurosci. 2019 Jul;22(7):474-487.
- 7. van den Brink AC1, Brouwer-Brolsma EM1, Berendsen AAM1, van de Rest O1. The Mediterranean, Dietary Approaches to Stop Hypertension (DASH), and Mediterranean-DASH Intervention for Neurodegenerative Delay (MIND) Diets Are Associated with Less Cognitive Decline and a Lower Risk of Alzheimer's Disease-A Review. Adv Nutr. 2019 Nov 1;10(6):1040-1065.
- 8. Girard T, Russell K, Leyse-Wallace R. Academy of Nutrition and Dietetics: Revised 2018 Standards of Practice and Standards of Professional Performance for Registered Dietitian Nutritionists (Competent, Proficient, and Expert) in Mental Health and Addictions. J Acad Nutr Diet 2018 vol: 118 (10): 1975-1986
- 9. Jeynes KD, Gibson EL. The importance of nutrition in aiding recovery from substance use disorders: A review. Drug Alcohol Depend. 2017 Oct 1;179:229-239.
- Mitchell SL, Klein J, Maduramente A. Assessing the Impact of an Eating Disorders Treatment Team Approach With College Students. Eat Disord. 2015 Jan 8 [cited 2019 Jun 7];23(1):45–59. Available from: http://www.tandfonline.com/doi/abs/10.1080/10640266.2014.959847
- 11. Golden NH, Keane-Miller C, Sainani KL, Kapphahn CJ. <u>Higher caloric intake in hospitalized adolescents with anorexia nervosa is associated with reduced length of stay and no increased rate of refeeding syndrome</u>. J Adolesc Health. 2013 Nov;53(5):573-8.
- 12. Ip A, Zwaigenbaum L, Brian J. Canadian Paediatric Society, Position Statement Post-diagnostic management and follow-up care for autism spectrum disorder Autism Spectrum Disorder Guidelines Task Force Paediatr Child Health 2019 24(7):461–468.
- 13. Geraghty M, Depasquale G, Lane A. Nutritional Intake and Therapies in Autism A Spectrum of What We Know: Part 1. 2010 ICAN: Infant, Child, and Adolescent Nutrition 2(1): 62-69.
- 14. Geraghty M, Bates-Wall J, Ratliff-Schaub K, Lane A. Nutritional Interventions and Therapies in Autism: A Spectrum of what we Know: Part 2. 2010 ICAN: Infant, Child, & Adolescent Nutrition 2 (2): 120-133.
- 15. Marí-Bauset S, Zazpe I, Mari-Sanchis A, Llopis-González A, Morales-Suárez-Varela M. Food Selectivity in Autism Spectrum Disorders. J Child Neurol [Internet]. 2014 Nov 4;29(11):1554–61. Available from: http://journals.sagepub.com/doi/10.1177/0883073813498821
- 16. Hassapidou M, Papadimitriou K, Athanasiadou N et al. Changes in body weight, body composition and cardiovascular risk factors after long-term nutritional intervention in patients with severe mental illness: an observational study. BMC Psychiatry 11, 31 (2011).