Nutritional Psychiatry: recent advances in evidence for diet and nutrition for mental and brain health

Prof Felice N Jacka Food & Mood Centre, Deakin University Murdoch Childrens Research Institute The Black Dog Institute

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Global Burden of Disease study

Global, regional, and national comparative risk assessment of 84 behavioural, environmental and occupational, and metabolic risks or clusters of risks, 1990–2016: a systematic analysis for the Global Burden of Disease Study 2016

GBD 2016 Risk Factors Collaborators*

Lancet 2017; 390: 1345-422









Poor diet?

- Diets low in:
 - Fruits
 - Vegetables
 - Wholegrains
 - Nuts and seeds
 - Fibre
 - Healthy fats







Poor diet?

- Diets high in:
 - Red meat
 - Processed meat
 - Added sugars
 - Sugar Sweetened Beverages
 - Trans fats
 - Sodium





Mental and Substance Use Disorders



CENTRE



401

Overview of Nutritional Psychiatry: what do we know so far?





THE AMERICAN JOURNAL OF PSYCHIATRY



Prenatal Infection and Schizophrenia: A Review of Epidemiologic and Translational Studies Alan S. Brown, M.D., M.P.H. and Elena J. Derkits, B.A.

Combination of Antidepressant Medications From Treatment Initiation for Major Depressive Disorder: A Double Blind Randomized Study Pierre Blier, M.D., Ph.D., et al.

 Association of Western and Traditional Diets With Depression and Anxiety in Women
 Felice N. Jacka. Ph.D., et al.

Psychiatric Disorders in Preschool Offspring of Parents With Bipolar Disorder: The Pittsburgh Bipolar Offspring Study (BIOS) Boris Birmaher, M.D., et al.

Continuing Medical Education 359

March 2010 Volume 167 • Number 3

Official Journal of the AMERICAN PSYCHIATRIC ASSOCIATION

ajp.psychiatryonline.org



AJP in Advance. Published January 4, 2010 (doi: 10.1176/appi.ajp.2009.09060881)

Article

Association of Western and Traditional Diets With Depression and Anxiety in Women

General Health Questionnaire (GHQ-12)

was used to measure psychological symp-

toms, and a structured clinical interview

was used to assess current depressive and

anxiety disorders.

 Felice N. Jacka, Ph.D.
 Mark A. Kotowicz, M.D.

 Julie A. Pasco, Ph.D.
 Michael Berk, M.D., Ph.D.

 Arnstein Mykletun, Ph.D.
 Objective: Key biological factors that influence the development of depression are modified by diet. This study examined the extent to which the high-prevalence mental disorders are related to habitual disorders are related to habitual diet in 1,046 women ages 20-93 years randomly selected from the population.

 Geoffrey C. Nicholson, M.D., Ph.D.
 Method: A diet quality score was derived habitual diet un answers to a food frequency questionnaire, and a factor analysis identified habitual dietary raters. The 12-term

economic status, education, and health behaviors, a "traditional" dietary pattern characterized by vegetables, fruit, meat, fish, and whole grains was associated Objective: Key biological factors that with lower odds for major depression or influence the development of depresdysthymia and for anxiety disorders. A sion are modified by diet. This study "western" diet of processed or fried foods, examined the extent to which the highrefined grains, sugary products, and beer prevalence mental disorders are related was associated with a higher GHO-12 to habitual diet in 1,046 women ages score. There was also an inverse associa-20-93 years randomly selected from the tion between diet quality score and GHQ-12 score that was not confounded by age. Method: A diet quality score was derived socioeconomic status, education, or other from answers to a food frequency queshealth hebaviors

Conclusions: These results demonstrate an association between habitual diet quality and the high-prevalence mental disorders, although reverse causality and confounding cannot be ruled out as explanations. Further prospective studies are warranted.

Results: After adjustments for age, socio-

(Am J Psychiatry Jacka et al.; AiA:1-7







Diet and Depression in Adulthood

Chuck for

Molecular Psychiatry https://doi.org/10.1038/s41380-018-0237-8

REVIEW ARTICLE

Healthy dietary indices and risk of depressive outcomes: a systematic review and meta-analysis of observational studies

Camille Lassale^{1,2} · G. David Batty¹ · Amaria Baghdadli^{3,4} · Felice Jacka ⁵ · Almudena Sánchez-Villegas^{6,7} · Mika Kivimäki ^{1,8} · Tasnime Akbaraly ^{1,3,9}

Received: 10 May 2018 / Revised: 26 July 2018 / Accepted: 2 August 2018 © Springer Nature Limited 2018

	Ν	N						
Study	total	events				OR (95% CI)	Score	Comparator
Cohort								
Adjibade 2017; Female	1492	103				0.95 (0.57, 1.59)	rMED	T3 vs T1
Adjibade 2017; Male	2031	69		*	-	0.58 (0.29, 1.13)	rMED	T3 vs T1
Hodge 2013	8660	731				0.72 (0.54, 0.95)	MDS	7-9 vs 0-3
Lai 2016; Female	9280	continuous -				0.42 (0.26, 0.68)	MDS	6-9 vs 0-2
Sanchez-Villegas 2015	15093	1051				0.70 (0.58, 0.85)	MDS	6-9 vs 0-2
Subtotal (I-squared = 33.1%, p =	0.201)			\diamond		0.67 (0.55, 0.82)		
Cross-sectional								
Veronese 2016	4470				-	0.82 (0.65, 1.04)	aMED	Q4-5 vs Q1-3
Tehrani 2018; Female adolescent	5 263	←				0.41 (0.17, 0.97)	MSDPS	Q5 vs Q1
Subtotal (I-squared = 55.8%, p =	0.133)				\geq	0.66 (0.35, 1.24)		
Overall (I-squared = 34.4% , p = 0	.166)			\diamond		0.69 (0.59, 0.82)		
		.2	.5		1			

Fig. 1 Meta-analysis of studies investigating the association between a traditional Mediterranean diet and depressive outcomes. Estimates are ORs, RRs or HRs of depression for people with highest adherence

compared to lowest adherence (categories or quantiles specified). MDS Mediterranean diet score, rMED relative MDS, aMED alternative MDS, T tertile, Q quintile



Fig. 4 Meta-analysis of studies investigating the association between the Dietary Inflammatory Index DII and depressive outcomes. Estimates are ORs, RRs, or HRs of depression for people with lowest adherence compared to highest adherence (categories or quantiles specified). T tertile, Q5 quintile, Q4 quartile

A DEAKIN IDEA

Decreased incidence of depression: Adherence to a Mediterranean diet: 0.67 (95% CI 0.55–0.82) Lower Dietary Inflammatory Index: 0.76 (95% CI 0.63–0.92).

Lassale et al. Molec Psychiat. 2018.

Diet and Mood in Adolescents

Associations between diet quality and depressed mood in adolescents: results from the Australian Healthy Neighbourhoods Study

Felice N. Jacka, Peter J. Kremer, Eva R. Leslie, Michael Berk, George C. Patton, John W. Toumbourou, Joanne W. Williams

Healthy Neighbourhoods Study n = 7114 Age 10 - 14 years



Jacka et al. Aust N Z J Psychiatry. 2010.



Diet and Mental Health in Early Life



Impact of early life nutritional exposures extends from physical to mental health





State of the evidence in 2017



Consistent observational data across countries, cultures and age groups

- fulfill Bradford Hill criteria for causality
- largely independent of SES, education, body weight, other health behaviours
 - Not apparently explained by reverse causality

Very extensive data from animal studies

NEED for RCTs





Dietary improvement as a treatment strategy in major depression: the SMILES trial





O'Neil A...Jacka F. A randomised, controlled trial of a dietary intervention for adults with major depression (the SMILES trial): study protocol **BMC Psychiatry** 2013 13:114



Study aim



To investigate the efficacy and costeffectiveness of dietary improvement in the treatment of major depression







Participants randomly assigned to receive either.....



Dietary support (clinical dietitian) or Social support (RA)











RESULTS

Effect size:

Cohen's d = -1.16 (95% Cl -1.73, -0.59)

NNT= 4.1





Jacka et.al. 2017 BMC Medicine A DEAKIN IDEA

Kon





Change in MADRS over 3 months across quartiles of adherence to Mod*i*MedDiet

Jacka et.al. 2017 BMC Medicine



academicjournals

Vol. 7(5), pp. 159-169, May 2015 DOI: 10.5897/JFHE2014.0668 Article Number: 213D23952222 ISSN 2006-9723 Copyright Ø 2015 Author(s) retain the copyright of this article http://www.academicjournals.org/JPHE

Journal of Public Health and Epidemiology

Is it cheaper to eat an unhealthy vs a healthy diet?

Epic



Full Length Research Paper

Assessing healthy diet affordability in a cohort with major depressive disorders

Rachelle S. Opie¹*, Leonie Segal², Felice N. Jacka³, Laura Nicholls³, Sarah Dash³, Josephine Pizzinga³ and Catherine Itsiopoulos¹

- Trial participants spent an estimated mean of \$138 per week on food and beverages for personal consumption at the start of the trial
- Total food and beverage costs per person per week for the recommended modified Mediterranean diet was estimated at \$112
- The modified Mediterranean diet at \$1.54 per mega-joules (MJ) was cheaper per energy unit than the cost of the current dietary intake of the SMILES participants at a mean of \$2.35 per MJ



\$138 vs \$112 per week



Economic Evaluation

- We measured time lost (absenteeism) from paid and unpaid work (volunteering, study, house-keeping)
- We measured visits to health care professionals
- We measured the costs of delivering the interventions and the diet itself
- Compared with the social support condition, average total health sector costs were \$856 lower and average societal costs were \$2591 lower for those receiving dietary support.
- These differences were driven by lower costs arising from fewer allied and other health professional visits and lower costs of unpaid productivity (*Chatterton et al. 2018 BMC public health*)





Nutritional Neuroscience

An International Journal on Nutrition, Diet and Nervous System

ISSN: 1028-415X (Print) 1476-8305 (Online) Journal homepage: http://www.tandfonline.com/loi/ynns20

A Mediterranean-style dietary intervention supplemented with fish oil improves diet quality and mental health in people with depression: A randomized controlled trial (HELFIMED)

Natalie Parletta, Dorota Zarnowiecki, Jihyun Cho, Amy Wilson, Svetlana Bogomolova, Anthony Villani, Catherine Itsiopoulos, Theo Niyonsenga, Sarah Blunden, Barbara Meyer, Leonie Segal, Bernhard T. Baune & Kerin O'Dea

To cite this article: Natalie Parletta, Dorota Zarnowiecki, Jihyun Cho, Amy Wilson, Svetlana Bogomolova, Anthony Villani, Catherine Itsiopoulos, Theo Niyonsenga, Sarah Blunden, Barbara Meyer, Leonie Segal, Bernhard T. Baune & Kerin O'Dea (2017): A Mediterranean-style dietary intervention supplemented with fish oil improves diet quality and mental health in people with depression: A randomized controlled trial (HELFIMED), Nutritional Neuroscience, DOI: 10.1080/1028415X.2017.1411320

To link to this article: <u>https://doi.org/10.1080/1028415X.2017.1411320</u>





Taylor & Francis

HELFIMED study: effect of Mediterranean diet on mental health in people with depression





DASS Depression Score (P=0.027 for treatment interaction, N=152)

Parletta, Zarnowiecki, Cho, Bogomolova, Wilson, Villani, Itsiopoulos, Segal, Niyonsenga, O'Dea et al., under review

Whole Diet-Focused Treatment

SYSTEMATIC REVIEW/META-ANALYSIS

OPEN

The Effects of Dietary Improvement on Symptoms of Depression and Anxiety: A Meta-Analysis of Randomized Controlled Trials

Joseph Firth, PhD, Wolfgang Marx, PhD, Sarah Dash, PhD, Rebekah Carney, PhD, Scott B. Teasdale, PhD, Marco Solmi, MD, Brendon Stubbs, PhD, Felipe B. Schuch, PhD, André F. Carvalho, MD, Felice Jacka, PhD, and Jerome Sarris, PhD

Psychosomatic Medicine (2019)

Study name		S	tatistics fo	reach stu	udy				Hedges's g and 95% Cl			
	Hedges's g	Standard error	Variance	Lower limit	Upper limit	Z-Value	p-Value					
Agarwal et al. 2015	0.353	0.120	0.014	0.118	0.589	2.941	0.003			I		
Assaf et al. 2015	0.027	0.010	0.000	0.008	0.046	2,744	0.006			<u> </u>		
∃invik et al. 2010	-0.048	0.089	0.008	-0.222	0.127	-0.534	0.593			-0-		
Endevelt et al. 2010	0.711	0.248	0.061	0.226	1.196	2.873	0.004					
Forster et al 2012	0.223	0.124	0.015	-0.020	0.466	1.798	0.072				-	
-tyyppa et al. 2003	-0.136	0.182	0.033	-0.492	0.220	-0.749	0.454					
mayama et al. 2011	0.273	0.096	0.009	0.085	0.461	2.844	0.004				• •	
Jacka et al. 2017	0.865	0.279	0.078	0.319	1.412	3.102	0.002			- 1		-
Jenkinson et al. 2009	0.216	0.103	0.011	0.013	0.418	2.088	0.037					
Kasckow et al. 2014a	-0.583	0.414	0.172	-1.395	0.230	-1.406	0.160					
Kasckow et al. 2014b	0.120	0.255	0.065	-0.381	0.620	0.469	0.639				-	
Kiernan et al. 2001	-0.095	0.233	0.054	-0.552	0.362	-0.408	0.683					
VicMillian et al. 2011	0.149	0.388	0.150	-0.611	0.908	0.383	0.702			O		
Vieman et al. 2000	0.159	0.207	0.043	-0.247	0.565	0.768	0.442				-	
Scheier et al. 2005	0.234	0.115	0.013	0.009	0.459	2.035	0.042					
Nardle et al. 2000	1.683	0.166	0.028	1.358	2.008	10.139	0.000					
	0.275	0.089	0.008	0.100	0.450	3.074	0.002				- 1	
								-2.00	-1.00	0.00	.00	:
									Favours Control		Favours Diet	

- N=16 RCTs with 45,826 participants
- Dietary interventions significantly reduced depressive symptoms
- No effect was observed for anxiety (but few studies)
- Greater benefits in females for both depression and anxiety



Firth et al. 2019 In Press



Take-home message

Diet matters to mental and brain health

DIET IS MODIFIABLE – TARGET FOR PREVENTION AND TREATMENT





Current Clinical Practice Guidelines

RANZCP Guidelines

Royal Australian and New Zealand College of Psychiatrists clinical practice guidelines for mood disorders

Gin S Malhi^{1,2}, Darryl Bassett^{3,4}, Philip Boyce⁵, Richard Bryant⁶, Paul B Fitzgerald⁷, Kristina Fritz⁸, Malcolm Hopwood⁹, Bill Lyndon^{10,11,12}, Roger Mulder¹³, Greg Murray¹⁴, Richard Porter¹³ and Ajeet B Singh¹⁵



Australian & New Zealand Journal of Psychiatry 2015, Vol. 49(12) 1087–1206 DOI: 10.1177/0004867415617657

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Current Clinical Practice Guidelines

Figure 6. Management of major depressive disorder.







The Lancet Psychiatry Commission

The Lancet Psychiatry Commission: a blueprint for protecting $\mathcal{M}^{\dagger} \boxtimes \mathbb{Q}$ physical health in people with mental illness

Joseph Firth, Najma Siddiqi^{*}, Ai Koyanagi^{*}, Dan Siskind^{*}, Simon Rosenbaum^{*}, Cherrie Galletly^{*}, Stephanie Allan, Constanza Caneo, Rebekah Carney, Andre F Carvalho, Mary Lou Chatterton, Christoph U Correll, Jackie Curtis, Fiona Gaughran, Adrian Heald, Erin Hoare, Sarah E Jackson, Steve Kisely, Karina Lovell, Mario Maj, Patrick D McGorry, Cathrine Mihalopoulos, Hannah Myles, Brian O'Donoghue, Toby Pillinger, Jerome Sarris, Felipe B Schuch, David Shiers, Lee Smith, Marco Solmi, Shuichi Suetani, Johanna Taylor, Scott B Teasdale, Graham Thornicroft, John Torous, Tim Usherwood, Davy Vancampfort, Nicola Veronese, Philip B Ward, Alison R Yung, Eoin Killackey[†], Brendon Stubbs[†]



Lancet Psychiatry 2019; 6: 675–712





Where to next?





www.foodandmoodcentre.org.au

FOOD& MOOD CENTRE

A **DEAKIN** IDEA

Food & Mood Centre Program



Mechanistic pathways



INFLAMMATION AND OXIDATIVE STRESS BDNF AND BRAIN PLASTICITY GUT MICROBIOTA





Diet Quality and Brain Plasticity





Personality and Total Health Through Life study: n = 255; aged 60 – 64 years;

4 years follow-up

Jacka et al. 2015 BMJ Medi



Diet Quality and Brain Plasticity

ARTICLE

Better diet quality relates to larger brain tissue volumes

The Rotterdam Study

Pauline H. Croll, MSc, Trudy Voortman, PhD, M. Arfan Ikram, MD, PhD, Oscar H. Franco, MD, PhD, Josje D. Schoufour, PhD, Daniel Bos, MD, PhD, and Meike W. Vernooij, MD, PhD Correspondence Dr. Vernooij m.vernooij@erasmusmc.n

Neurology® 2018;0:e1-e8. doi:10.1212/WNL.000000000005691

n = 4,213 Aged 46 – 98 years 10 years follow-up Results: "...better overall diet quality is related to larger total brain volume, gray matter, white matter, and hippocampal volume."



Adherence to dietary guidelines for specific food groups and brain volume

	Total brain volume	
Vegetables	3.35 (0.31 to 6.39) ^a	
Fruit	4.17 (1.10 to 7.24) ^a	
Whole grains	3.45 (0.32 to 6.58) ^a	
Legumes	0.08 (-3.13 to 3.29)	
Nuts	5.91 (2.26 to 9.55) ^a	
Dairy	2.45 (-0.59 to 5.49)	
Fish	2.44 (-0.47 to 5.35)	
Теа	-0.20 (-5.43 to 5.02)	
Grains	5.39 (1.84 to 8.94) ^a	
Fats	2.10 (-0.97 to 5.16)	
Red meat	2.29 (-1.25 to 5.83)	
Sugar-containing beverages	–1.57 (–5.25 to 2.12)	
Alcohol	2.43 (-0.57 to 5.43)	
Salt	0.69 (-3.15 to 4.54)	A DEAKIN IDE





100 trillion microorganisms
99.5% of our genetic material
23,000 human genes vs
4.4 million microbial genes





Biological Dysregulation in Depression

- Inflammatory and oxidative stress (cytokines, CRP, ROS)
- Metabolic (insulin resistance, metabolic syndrome)
- HPA axis (cortisol)
- Neurotransmitter/neuropeptide (dopamine, serotonin, GABA, BDNF)

Each modified by gut microbiota







A **dfakin** idfa

'GERM FREE MICE'

Altered stress response

Altered brain plasticity



Altered BBB

Altered levels of neurotransmitters

Altered immune system



Altered behaviours





Molecular Psychiatry (2016), 1–11 © 2016 Macmillan Publishers Limited All rights reserved 1359-4184/16 www.nature.com/mp

ORIGINAL ARTICLE

Gut microbiome remodeling induces depressive-like behaviors through a pathway mediated by the host's metabolism

P Zheng^{1,2,3,8}, B Zeng^{4,8}, C Zhou^{1,2,3,8}, M Liu^{1,2,3}, Z Fang^{1,2,3}, X Xu^{1,2,3}, L Zeng^{1,2,3}, J Chen^{1,2,3}, S Fan^{1,2,3}, X Du^{1,2,3}, X Zhang^{1,2,3}, D Yang⁵, Y Yang^{1,2,3}, H Meng⁶, W Li⁴, ND Melgiri^{1,2,3}, J Licinio^{7,9}, H Wei^{4,9} and P Xie^{1,2,3,9}

FMT from patients with MDD induced depressive-like behaviours in contrast to FMT from patients without MDD



NEUROSCIENCE

The gut microbiome from patients with schizophrenia modulates the glutamate-glutamine-GABA cycle and schizophrenia-relevant behaviors in mice

Peng Zheng^{1,2,3}*, Benhua Zeng⁴*, Meiling Liu⁵, Jianjun Chen⁶, Junxi Pan^{2,3,7}, Yu Han^{1,2,3}, Yiyun Liu^{1,2,3}, Ke Cheng^{1,2,3}, Chanjuan Zhou^{2,3}, Haiyang Wang^{1,2,3}, Xinyu Zhou^{1,2,3}, Siwen Gui^{1,2,3}, Seth W. Perry⁸, Ma-Li Wong⁸, Julio Licinio^{8†‡}, Hong Wei^{9†‡}, Peng Xie^{1,2,3†‡}



Zheng et al., Sci. Adv. 2019

- Observed profound gut microbiota alterations in patients with SCZ relative to HC subjects (incl lower alpha-diversity)
- Identified unique bacterial taxa that were strongly associated with SCZ severity
- GF mice colonization with human SCZ microbiota resulted in SCZ-relevant behavioral changes similar to those observed in glutamatergic mouse models of SCZ
- Mice receiving gut microbiome transfers from patients with SCZ displayed disturbances of microbial genes and host metabolites involved in amino acid and lipid metabolism, including glutamate, which has been strongly implicated in SCZ pathology



Main factors influencing microbiota

- Age
- Geography
 - Stress
 - Infection
- Medication use
 - Diet





The Healthy Parents, Healthy Kids Study



Samantha Dawson^{1,2}, Jeff Craig^{1,2}, Gerard Clarke³, Mimi Tang^{4,5}, Felice Jacka^{1,2}

- ^{1.} Deakin University
- ^{2.} Murdoch Childrens Research Institute
- ^{3.} University College Cork, Ireland
- ^{4.} Melbourne University
- ^{5.} Royal Children's Hospital



MOVING MOODS

Human microbial transfer as an adjunctive treatment for MDD

Primary outcome measure Feasibility

Aim n = 60 **Target population** adults with moderate to severe MDD

Primary objective

Investigate the feasibility of FMT as an adjunctive treatment for depression in adults

Secondary objectives

Establish whether FMT changes biological parameters in depressed adults, including the faecal microbiome, Hypothalamic Pituitary Axis activity, Neurogenesis, inflammation, cardiovascular and metabolic risk factors, cognition, Quality of life, gastrointestinal symptoms and tolerability. Depression symptoms (MADRS) will also be assessed.



Healthy Brain Project - Microbiome

How does the gut microbiome relate to Alzheimer's disease pathophysiology?

- Healthy Brain Project Florey Institute (lead by Drs Rachel Buckley & Yen ٠ Ying Lim) he Healthy FI
- PI: Dr Amy Loughman, RA: Madi West •
- Ultimate aim: predict relative risk of • Alzheimer's disease in healthy middleaged adults on the basis of genetic, microbiome & behavioural data.





Dr Amy Loughman



Exploring the association between dietary polyphenols and brain health

- Epidemiological studies
 - UKBiobank (N=~500,000), general population
 - Ausimmune case-control study (N=600), first dx of multiple sclerosis and healthy controls
 - Outcomes: incidence of mental illness, cognitive performance, fatigue, metabolomic and microbiome-related pathways



Meg Hockey

THE MOO'D STUDY

DOUBLE BLINDED 16-WEEK RCT



Primary outcome

Psychological distress (DASS-21 total)

Secondary outcomes

Sub scores of depression, anxiety and stress (DASS-21)

Severity of depressive symptoms (PHQ-8)

Cognitive function (Cogstate)



RECRUITMENT + DATA COLLECTION 2018-2020



Ketogenic Diet for psychotic symptoms – PsyDiet study

KETOGENIC DIET

- Glucose is restricted \rightarrow production of ketone bodies
- Used to manage epilepsy in children since the 1920s
- Only few case and animal studies in psychotic disorders/ schizophrenia
- Neuroprotective effects (adenosine and glutamate metabolism, AMPA receptor)?

A 6-week randomized, controlled ketogenic diet pilot intervention study in psychotic inpatients (n=40)

- Carbohydrates limited to max 20 grams/day
- Ketone-body levels, blood glucose levels
- Primary outcome: psychotic symptoms
- Secondary outcomes: depression, anxiety, functioning



Dr Anu Ruusunen

Global Obesity Collaboration

- Based in Centre for Population Health Research
- Community-based systems trial WHO STOPS (n>5000 children, 10 communities)
- Primary outcome of interest = childhood (6-12 years) obesity
 - FAMC (Dr Erin Hoare) will assess the mental and emotional health outcomes of nutritional and physical activity intervention
 - Opportunities to build mental health-related strategies into step-wedge design









Dr Erin Hoare

WHO Collaborating Centre for Obesity Prevention



- Medicare item numbers for Dietitians and Exercise Physiologists
- Large-scale pragmatic trials
- New models of clinical treatment (e.g. shared appointments)
- Global Burden of Disease Study





Joint WFSBP & ASLM International Taskforce

• Clinical Therapeutic Guidelines for Lifestyle Medicine in Mental Health Treatment









INTERNATIONAL SOCIETY FOR NUTRITIONAL PSYCHIATRY RESEARCH 2019

London, UK 20-22ND OCTOBER 2019





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Pan Macmillan Press February 2019





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www.australianrotaryhealth.org.au

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Dr Erin Hoare

FOOD & MOOD

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