Positive Psychiatry and Healthy Lifestyle Interventions Augmenting Psychotherapy for Mood Disorders Andrew Correll MS IV, Terry Correll, D.O., and Julie Gentile, M.D. [

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Abstract

Healthy lifestyle and positive psychiatry interventions of complement the treatment of mood disorders and help individuals who are not experiencing as much happines satisfaction in their lives as they desire. This poster gives examples of an optimal psychiatric treatment plan that would potentially include psychotherapy, psychotropic medications, and/or individualized and targeted healthy lifestyle and positive psychiatry interventions to not only treat mental illness, but also enhance overall well-being.

Introduction

Positive psychiatry is closely related \mathscr{O} to **positive psychology** which emphasizes the use of evidence-based techniques such as gratitude 🙏, mindfulness 📥, and learned optimism, and is a branch of psychiatry that focuses on improving overall well-being and mental health rather than solely alleviating mental illness and misery. Lifestyle medicine is a new paradigm that shifts much of the responsibility to the patient and can be defined as "the use of evidence-based lifestyle therapeutic approaches, such as a predominately whole food, plant-based diet, physical activity, sleep, stress management, tobacco cessation, and other nondrug modalities to prevent, treat, and, oftentimes, reverse the lifestylerelated chronic disease that's all too prevalent."¹

Clinical Case Vignette #1

54-year-old woman, D, presents with a weight gain of 19 pounds, sleeping on average 11 hours a night, lack of enjoyment in normally pleasurable activities, low energy, feelings



of being discounted by others, heavy and immobile limbs at least weekly upon awakening & associated psychomotor slowing. • 15.3% of those diagnosed with Major Depressive Disorder have

atypical symptoms²

A healthy lifestyle intervention to suggest might be eating **two** more servings of fruits and/or vegetables ³³ a day which may enhance feelings of well-being³

Clinical Pearl

• If a patient enjoys a particular healthy food or practice, it may be wise to capitalize on that and encourage any small victories

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tuffs to induce innate immune activation of human monocytes in vitro is dependent on food content of stimulants of Toll-like receptors 2 and 4. British Journal of Nutrition. 2011:105(1):15-23. doi:10.1017/S0007114510003004

 SMILES Use trial = 12 wks of whole grains, fruits, vegetables, and legumes reduced In psychotherapy, H later mentions he wants to be happier MADRS (Montgomery-Asberg Depression Rating Scale) depression scores (n=67)⁴ and is considering working more to pay for toys for his kids A Mediterranean-like ^{IMD} diet for 3 weeks (n=101) reduced depression scores, and Experiences tend to lead to more satisfaction than effects persisted at least 3 months after the study⁵ possessions²⁴ and a materialistic mindset is negatively A meta-analysis of 16 randomized controlled trials of a variety of healthy diets correlated \square with happiness²⁵ found a **beneficial effect** (g=0.275) **on depression** more than anxiety⁶ Choosing between toys or time with his kids, H might A meta-analysis of 24 prospective cohort studies found those with a healthy diet work on improving his relationships with his family, as including fish (, fruit), legumes, pulses, nuts, seeds, vegetables, and relationships are strongly positively associated with whole grains had a **decreased risk of depression** in a dose response fashion⁷ happiness²⁶⁻²⁸ Depressed individuals have increased inflammation (4, 8, 9, 9) and processed foods and Money 🌌 may "buy" happiness moreso at lower meat *cause more inflammation than do fruits and vegetables*^{10,11} income levels, but not as much beyond a level of basic There are anti-inflammatory fillowing flavonoids and polyphenols in colorful fruits and sufficiency,²⁹ and overall the correlation between money vegetables like oranges, strawberries, and broccoli and happiness is remarkably weak³⁰

- A review found polyphenols from colorful fruits & vegetables had the strongest
- association with increased BDNF levels among different food patterns¹²

Clinical Pearl

Flavor intensity tends to be higher in those with healthier diets¹⁵ Help patients discover 🐺 new, flavorful ways to mix whole grains, fruits, and vegetables into their diet by suggesting recipes or pairing less savory foods (plain oatmeal (^) with other tastier ingredients (berries 🔹, nuts 🦉, or cinnamon)

Clinical Case Vignette #2

A 34-year-old male, H, with Persistent Depressive Disorder and Borderline Personality Disorder seeks further ways to enhance happiness during a follow-up appt. for sertraline management.

Persistent Depressive Disorder $\rightarrow 0.5-1.5\%$ in the general population, twice 送 as common in females as males¹⁶ Borderline Personality Disorder is a significant risk factor for Persistent Depressive Disorder¹⁷

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Discussion during psychotherapy could suggest gratitude journaling 📝 Gratitude interventions, involving expressions of thankfulness A, can modestly alleviate depression and anxiety.^{18,19} Useful as initial or adjunct treatments, they show rapid effects within two weeks, faster than antidepressants ¹.²⁰⁻²² Cognitive restructuring around optimistic thinking a central goal of psychotherapy Study with 54 participants had one group write down all aspects of their future ideal self (Best Possible Self) and visualize 👀 this concept at home 🏠 five minutes

a day. After two weeks, optimism scores were significantly increased as compared to a control group.²³

Mensink RP Plat 1 Effects of nutritional interventions on BDNF concentrations in humans: a systematic review. Nutritional Neuroscience. 2021;0(0):1-12. doi:10.1080/1028415X.2020.18657 nii H. Lu B. New insights into BDNF function in depression and anxiety. Nature Neuroscience, 2007;10(9);1089-1093, doi:10.1038/nn197 Brunoni AR Lones M Fregni F A systematic review and meta-analysis of clinical studies on major depression and BDNF levels: Implications for the role of neuroplasticity in depression, International Journal of Neuropsychopharmacology, 2008;11(8);1169-118 doi:10.1017/S146114570800930 15. Cox DN. Hendrie GA. Lease HJ. Do healthy diets differ in their sensory characteristics? Food Quality and Preference. 16. Blanco C. Okuda M. Markowitz JC. Liu SM. Grant BF. Hasin DS. The epidemiology of chronic major depressive disorder and dysthymic disorder: results from the National Epidemiologic Survey on Alcohol and Related doi:10.4088/JCP.09m05663gr 17. Skodol AE, Grilo CM, Keyes KM, Geier T, Grant BF, Hasin DS. Relationship of Personality Disorders to the Course of Major Depressive Disorder in a Nationally Representative Sample. AJP. 2011;168(3):257-264. doi:10.1176/appi.ajp.2010.1005069! 18. Cregg DR, Cheavens JS. Gratitude Interventions: Effective Self-help? A Meta-analysis of the Impact on Symptoms of Depression and Anxiety. J Happiness Stud. 2021;22(1):413-445. doi:10.1007/s10902-020-00236-6 19. Davis DE, Choe E, Meyers J, et al. Thankful for the little things: A meta-analysis of gratitude interventions. Journal of Counseling Psychology. 2016;63(1):20-31. doi:10.1037/cou000010

ment with antidepressants. European Neuropsychopharmacology. 2012;22:S492-S498. doi:10.1016/i.euroneuro.2012.07.00

BDNF (brain-derived neurotrophic factor) **protective effects on depression and anxiety**^{13,14}



Fictional Patient #2 (Ai-generated)

Onset of Selective Serotonin Reuptake Inhibitor Antidepressant Action: Systematic Review and Meta-analysis, Archives of General Psychiatry, 2006;63(11):1217-1223, doi:10.1001/archosyc.63.11.12; come more optimistic by imagining a best possible self: Effects of a two week intervention. Journal of Behavior Therapy and Experimental Psychiatry. 2011;42(3):371-378. doi:10.1016/i.ibtep.2011.02.012 24. Carter TJ, Gilovich T. Getting the Most for the Money: The Hedonic Return on Experiential and Material Purchases. In: Tatzel M, ed. Consumption and Well-Being in the Material World. Springer Netherlands; 2014:49-62. doi:10.1007/978-94-007-7368-4_3 25. Moldes O, Ku L. Materialistic cues make us miserable: A meta-analysis of the experimental evidence for the effects of materialism on individual and societal well-being. Psychol Mark. 2020;37(10):1396-1419. doi:10.1002/mar.21387

- at his Temple

Clinical Pearl

Conclusions

Positive psychiatry strategies used wisely in combination with healthy lifestyle interventions (lifestyle psychiatry)⁴² can provide important augmentation to traditional psychiatric 🖤 treatments to optimize the treatment plan

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In psychotherapy, H later mentions he enjoys volunteering

Numerous studies have shown that **volunteering is** correlated with increased life satisfaction, greater happiness, and reduced symptoms of depression.³¹⁻³⁴ Regular volunteering has a positive 📈 association on well-being that increases with continued volunteering.³⁵

• If a patient enjoys humor, try judicious use of humor yourself during sessions. This used to be discouraged for psychotherapy,³⁶ but has since been explored more,³⁷ and recent data suggests humor can be associated with improved outcomes when utilized appropriately.³⁸ Humor 🧼 and lightheartedness 💙 can serve as a **barometer is of the patient's overall well-being**, as humor is considered to be one of our most mature and

healthy defense mechanisms

Bibliotherapy 둘 (reading helpful books) has evidence it is helpful in anxiety and depression and can provide good psychotherapy **s** discussion points³⁹⁻⁴¹

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