

“Food & Mood: How Nutrition Impact Mental Well-Being”

Webinar Questions Answered by Vicki Retelny, RDN

- What came first? Gut dysbiosis or mood disorders?

Gut dysbiosis and mood disorders are a two-way street as the gut-brain axis is in constant bi-directional communication. The gut affects the brain, and the brain affects the gut, therefore issues with one affects the other.

- What about when people "don't want to eat" when they are depressed or sad?

This is a real issue in practice. Keep meals simple and focus on assembling balanced meals versus cooking elaborate meals. I often point to convenient and frozen foods for my patients who have major depression disorder. If people really do not want to eat, I make sure they are at least drinking protein shakes or smoothies during the day for hydration, protein and calories.

- Vicki, you mention talk therapy a lot. What is this?

Talk therapy is a type of psychotherapy that involves talking with a mental health practitioner to illicit behavior change or action-focused goals (i.e., models like the Better Help app offer talk therapy services).

- Please provide reference for 2020 Nutrients article showing link between food behaviors & mental well-being.

This is a 2020 meta-analysis: Głabska D, Guzek D, Groele B, Gutkowska K. Fruit and Vegetable Intake and Mental Health in Adults: A Systematic Review. *Nutrients*. 2020 Jan 1;12(1):115. doi: 10.3390/nu12010115. PMID: 31906271; PMCID: PMC7019743.

- I have brought up the SMILES study with a client before. This client said that it is great, but often when experiencing depressive episodes, they do not have the ability to purchase healthy ingredients or assemble meals that meet the criteria. They said this seems to only work for those who could provide food for them. What is your recommendation if that is the case?

Yes, I have seen this in practice, too. I often recommend purchasing healthier frozen meals/foods, buying pre-cut veggies and fruits, bagged salads and/or using meal kits/services. The beauty of this study was that people with depression were able to improve the quality of their diets (and reduce depressive symptoms) when they worked with a dietitian. Over the 7 sessions they worked on simple, nourishing swaps that would fit within a Mediterranean-type diet. It was not a complete overhaul, but small changes, such as adding more pre-cut fruits and veggies, using EVOO instead of butter, adding in nuts and seeds to snacks and meals.

- Is alcohol intake treated the same as food? As in many people, stress eat. But what about those that stress drink?

Great question! Yes, in the addiction literature alcohol becomes a craveable substance because it offers temporary stress relief by releasing dopamine in the brain and making you feel relaxed; however, overuse of alcohol depresses the central nervous system and leads to dependence. Plus, it can increase anxiety and low mood states, too.

What to do with keeping snacking even though one is not hungry. If the building habit doesn't work, what else can be done?

Snacking when not physically hungry is a symptom of stress or hormonal imbalance (menstrual cycles – the week before period, can induce more hunger), as well as hedonic desire for highly palatable foods as it temporarily decreases the stress response (lowers cortisol). I recommend that if certain foods are a trigger to overeat to keep the food out of the environment or buy a small amount and savor and eat it slowly. Sometimes, thirst is mistaken for hunger – so I often tell my patients to hydrate well throughout the day and this can fend off cravings.

- Have you come across patients with MTHFR? What do you recommend and is it helpful to eliminate synthetic folic acid?

The CDC guidelines recommend getting the RDA of folate – the body processes all types, including synthetic folic acid. There isn't enough research to support that this gene variant alone significantly affects how the body processed folate.

- The Ramsey Food Scale (12 nutrients) did not list choline, but I thought I saw it on another earlier list to boost the brain. Did he omit choline for a reason?

Great question! Although, it's not one of the 12 nutrients on his food scale, choline is noted a key player in fending off depression and anxiety in Ramsey's book. He notes the choline is a "special molecule" that is important to the synthesis of lipids, including the myelin that insulates the neural circuitry, etc. So, choline is an important nutrient for brain health.

- Can you explain that a high fat diet is a factor in increasing stress?

High fat, typically saturated fats with fried foods, fatty meats and sweets can be inflammatory to the gut-brain axis. Inflammation is the immune system's response to stress. Inflammation causes the body to release pro-inflammatory cytokines, which engages the sympathetic nervous system (fight or flight mode), disrupts hormones and causes the release of the stress hormone, cortisol.

- In the hydration slide is body weight in kilograms or pounds?

Pounds

- What is the source of the 4 drinks or more for women/day and 5 drinks or more for men as an upper limit? Last thing I saw was 1 drink/day for women and 2 drinks/day for men and I'd like the updated source.

This is considered “heavy or binge drinking”, not moderate drinking. Source: <https://www.niaaa.nih.gov/health-professionals-communities/core-resource-on-alcohol/basics-defining-how-much-alcohol-too-much#pub-toc2>

- How do GLP-1s affect mood?

It's hard to pinpoint exactly how GLP-1 receptor agonists affect mood as it varies widely from person to person. In one way they can elevate mood with less food ruminations (aka “food noise”), cravings and mood swings surrounding hedonic hunger, but on the other hand moods can be flattened, turning off desire for things and depression can ensue in some people.

- What do you recommend supporting a better mood for those who struggle with GI issues like IBS and may be limited with certain foods?

When working with patients with IBS, I recommend that they keep a symptom log and we work on discerning which foods may be causing gas, bloating, and abdominal pain. I offer suggest Low FODMAP foods and discuss feelings associated with certain foods and the awareness alone can boost mood and make them feel better. I recommend Kate Scarlata and Megan Reihl's book, *Mind Your Gut: The Science Based Whole Body Guide to Living with IBS*.

- Please comment on sleep deprived individuals; How to restore a better sleep pattern than staying up all night?

I would go through the sleep hygiene practices of getting to bed earlier, turning off screens at least 1 hour before bed, keeping the room cool and dark, using a white noise machine, if needed or calming music or the Calm app to listen to something soothing to get in the mood for sleep. (Keep food out of the bedtime routine and aim to stop drinking water at least an hour before bed to avoid the need to get up to go to the restroom in the middle of the night.)

- Do you recommend supplementation of creatine with your clients?

Creatine can be beneficial for increasing muscle mass and brain function (not necessarily mood enhancement). I recommend 5 grams a day/max. Mixed into lukewarm water to help with dissolving and drinking immediately as it breaks down quickly.

- Outside of olive oil, what foods do you recommend for mental health for patients with food allergies such as nuts, tree nuts, seafood, sesame seed and many fruits?

Food allergies can be tricky. For fiber and healthy fats, I recommend beans, lentils, legumes (if non-allergenic), in addition avocados, avocado oil and grapeseed oil. For addition protein, nutritional yeast and quinoa.

- Is there a good Mediterranean diet cookbook that you would recommend?

Yes, the one I referred to at the end of my presentation: *Mediterranean Mood Food: What to Eat to Help Beat Depression and Anxiety and Live a Longer, Healthier Life* by Paula Mee, Msc, RD.

- Does this apply to people with brain injuries and now have depression and anxiety?

Yes, it can. It depends how severe the brain injury is, but dietary changes with a more plant-forward, nutrient-dense approach can help with healing, brain function and cognition.

- Sleep often seems a trigger to depression; Can you elaborate?

When your brain is sleep-deprived it can throw off the balance of mood-enhancing neurotransmitters, such as dopamine, glutamate and serotonin. Your brain craves more energy when sleep deprived and this alters mood, creating more stress and increasing susceptibility to negative emotions. Many depressed individuals have insomnia or disrupted sleep patterns.

- Do you have any experience with post BMT patients and overall mood once diet is advanced and back to base line as there are studies that show how it changes with transplant.

No, unfortunately, I don't have any experience with post-BMT patients.

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