

## A STUDY TO ASSESS THE SIGNIFICANCE OF NUTRITIONAL INTERVENTION IN THE MANAGEMENT OF ANXIETY

<sup>1</sup>Zhang Ruyi, <sup>2</sup>Mrutyunjay Sisugoswami

<sup>1,2</sup>Lincoln University College, Petaling Jaya, Malaysia

### **Corresponding Author:**

**To Cite This Article:** Ruyi, Z., & Sisugoswami, M. (2025). A STUDY TO ASSESS THE SIGNIFICANCE OF NUTRITIONAL INTERVENTION IN THE MANAGEMENT OF ANXIETY. Journal of Advance Research in Pharmacy and Biological Science (ISSN 2208-2360) , 11(1), 85-90. <https://doi.org/10.61841/3tfbcg95>

### **ABSTRACT**

*In spite of the widespread incidence of anxiety disorders in today's culture, medication and psychotherapy frequently fail to totally alleviate the symptoms of anxiety disorders. In addition to the care of symptoms, one further strategy involves addressing the metabolic abnormalities that are the root cause of mental illness and anxiety. Nutritional therapy might make this accomplishment easier to accomplish. It is not the purpose of this study to conduct a comprehensive review of the research that are currently available; rather, the major objective is to argue that clinical psychiatrists should give nutritional therapy a higher priority when it comes to the management of anxiety. Dietary interventions may be beneficial for persons who suffer from anxiety, which is widespread among specific populations. According to the findings of recent research, nutrition has the potential to be an effective metabolic intervention in lowering the prevalence of anxiety disorders. Correlations between pathological conditions and anxiety disorders, with an emphasis on inflammation and dysbiosis of the microbiome as potential contributors. It is crucial to address microbiome dysbiosis and inflammation, diseases that are particularly relevant to anxiety disorders, in order to demonstrate that anxiety is a metabolic issue. The existence of six different dietary approaches is the second piece of evidence-based knowledge concerning activities that are used in anxiety therapy. Some of these include ensuring that you get an enough amount of vitamin D, avoiding artificial sweeteners and gluten, incorporating omega-3 fatty acids and turmeric (curcumin) into your diet, and adhering to a ketogenic diet program. This article does a good job of discussing nutritional strategies that can be used to produce accurate knowledge regarding dietary treatments for the management of metabolic states and anxiety.*

**KEYWORDS:** Nutritional intervention, metabolic state, nutritional strategies, anxiety management

## INTRODUCTION

Anxiety disorders are the most prevalent among mental health conditions. Anxiety problems impact over 30% of the population (Psychiatry, 2025). The elevated failure rate of pharmaceutical therapies for numerous neurological disorders, when combined with alternative treatment methods for anxiety, closely resembles that of behavioural therapy and medication used independently. Significant neurodegenerative disorders currently lack disease-modifying pharmacotherapies, and antidepressants are effective in only around one-third of clinical instances. Concerning the latter, almost all developed treatments fail to ease symptoms. Moreover, specific metabolic irregularities associated with neurological disorders and mental illnesses are affected by lifestyle factors; hence, it is prudent to address mental illnesses by integrating lifestyle therapies alongside medical treatment. Pharmacological treatments for metabolic disorders are complemented with lifestyle interventions for mental health conditions (Luo et al., 2021). The dietary metabolic therapeutic agent in the management of anxiety and various behavioural disorders for their numerous symptoms.

The findings align with existing knowledge about the advantages of healthy eating habits in reducing anxiety levels, as demonstrated in prior study. Research suggests that an improved diet may mitigate certain symptoms of anxiety. Evidence suggests that dietary treatments can enhance health, are cost-effective, and pose minimal risk unless contraindicated by a medical condition, such as an allergy. Nutritional therapy for anxiety disorders is not commonly offered by medical experts, including primary care physicians, psychiatrists, nutritionists, and naturopaths (Aucoin et al., 2021). Consequently, investigating the effective organisation of nutritional therapy may aid in the management of anxiety disorders.

## BACKGROUND OF THE STUDY

The International Society for Nutritional Psychiatry Research (ISNPR) promotes the extensive integration of nutritional medicine into psychiatric therapy. Research, educational methodologies, governmental policies, and health advocacy collectively endorse this innovative perspective. The construction of an evidence foundation is hindered by the intricate nature of behavioural health difficulties, hindering the execution of this method. Multiple recognised risk factors for behavioural health disorders encompass biological, environmental, social, and intrapersonal components (Kris Etherton et al., 2021). Consequently, due to residual confounding, it will be difficult to determine the relative contributions of different components, which is anticipated to affect the outcomes. The primary aim of this research was to analyse the existing literature on dietary therapies for anxiety disorders and their potential efficacy. Chronic excessive anxiety across various domains, accompanied by bodily manifestations, last for a minimum of six months and leads to considerable distress or functional impairment; this condition is identified as generalised anxiety disorder. Anxiety problems profoundly impact both individuals and society. Anxiety disorders are associated with considerable dysfunction, diminished quality of life, and severe psychological distress. The heightened utilisation of primary care, emergency department visits, and specialised healthcare services correlates with the existence of an anxiety illness. These conditions are equally common. The national comorbidity survey indicated that 31.2% of the population encounters an anxiety condition at some point in their lives. Psychopharmacology and psychotherapy are the principal methods for addressing anxiety disorders. Although these treatments assist many individuals, numerous others find them unavailable, inconvenient, or inadequate in easing their anxiety symptoms. Research on complementary and alternative medicine is increasingly more prominent (Aucoin et al., 2021).

## PURPOSE OF THE STUDY

The purpose of this article is to critically evaluate the relevance of metabolic state for anxiety management activities. This study assessed dynamic nature associated with nutritional intervention practices influencing metabolic states; further assisting in management of anxiety among individuals with anxiety disorders. Collection of relevant information about the significance of metabolic state management also ensure improvement of individual capabilities in anxiety management. Eventually, the article would serve the purpose to improve the knowledge about nutritional intervention practices assisting in decreasing the prevalence of anxiety disorders.

## LITERATURE REVIEW

Anxiety is one of the most widespread kinds of mental disorder worldwide. A person with generalised anxiety disorder exhibits excessive concern about several issues and may also manifest physical symptoms. Severe discomfort or diminished functionality ensues, persisting for a minimum of six months. A panic disorder is defined by repeated, sudden panic episodes, intense anxiety persisting for at least one month before, during, or after an attack, or significant behavioural alterations occurring during an attack. For instance, being in a congested public space where escape or assistance during an emergency appears unattainable may provoke an agoraphobic episode. Symptoms of social anxiety disorder include anxieties and a fear of being observed by others in social contexts. A specific phobia is characterised by an intense dread of a particular object or scenario. The impact of anxiety disorders on individuals and society is substantial. Anxiety disorders manifest as severe psychological distress, diminished quality of life, and significant disability. Anxiety disorders correlate with increased consultations with primary care physicians, emergency departments, and specialists. Integrating psychotherapy with pharmacotherapy is a prevalent method for addressing anxiety disorders. While these therapies benefit many individuals, others may perceive them as too uncomfortable, difficult to access, or insufficiently effective in alleviating their anxiety (Pilecki et al., 2021).

Nutritional therapy's application in the diagnosis, management, and prevention of mental health disorders constitutes a burgeoning field of research termed nutritional psychiatry interventions. Despite increasing evidence that nutritional

recommendations might positively influence mental health patients, such guidance is infrequently provided in therapeutic environments. Recent high-quality intervention research indicates that dietary modifications can mitigate depression. Anxiety disorders have received less funding for research compared to mood disorders. Limited research has comprehensively examined the literature regarding dietary interventions and anxiety symptoms or disorders. Even fewer studies have provided dietary recommendations, education, or food-based interventions for those diagnosed with anxiety disorders (Staudacher et al., 2023). This research will examine existing literature on anxiety symptoms/disorders and dietary components that may assist individuals in managing their anxiety.

## RESEARCH QUESTION

- What is the relevance of metabolic state on anxiety management?

## METHODOLOGY

### RESEARCH DESIGN

The researchers conducted a cross-sectional study to collect data spanning three quarters. The implementation of the cross-sectional design necessitated efficient and economical data collection at a singular moment. The researcher selected a quantitative methodology owing to constraints in time and resources. The poll was conducted among all participants by a random selection procedure. Subsequently, we utilised Rao Soft to determine the requisite sample size; the program indicates that a minimum of 700 individuals must be interviewed for this study. For individuals who cannot read or write, or who are wheelchair-bound, a researcher would audibly present the survey questions and meticulously document their responses verbatim on the survey form. Participants would receive a briefing on the investigation and be afforded the opportunity to pose questions to the researcher while awaiting the completion of the surveys. Occasionally, we request that you complete and submit our surveys simultaneously.

### SAMPLING

Participants were requested to complete questionnaires to participate to the research. Upon ascertaining that the research sample comprised 657 individuals utilising the Rao-soft tool, a total of 896 questionnaires were disseminated. Following the exclusion of 45 partial responses, the researchers obtained 778 full responses, resulting in a total sample size of 778.

### DATA AND MEASUREMENT

The primary data for the study was obtained from a questionnaire survey, which may have been conducted as a one-to-one correspondence survey or via Google Forms. Demographic data from both online and offline channels was gathered in part A, while responses to the criteria were solicited using a 5-point Likert scale in section B. The majority of the secondary material was derived from internet sources, while it was extracted from a diverse array of origins.

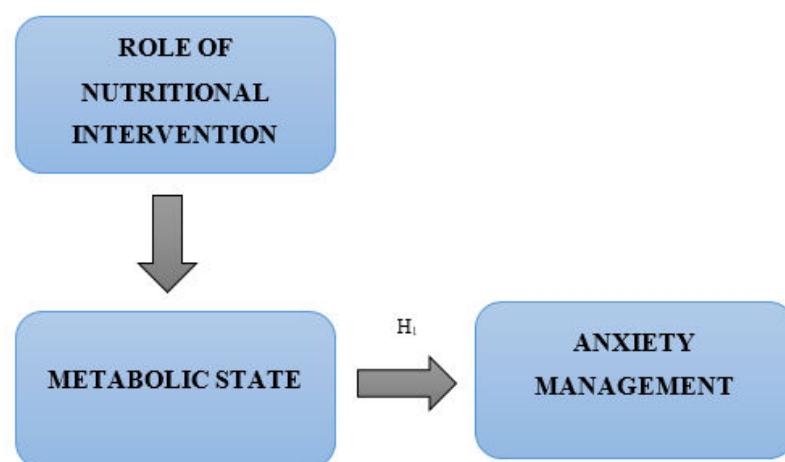
### STATISTICAL SOFTWARE

SPSS 25 and MS Excel was used for statistical analysis.

### STATISTICAL TOOLS

A descriptive analysis was conducted to comprehend the fundamental structure of the data. A descriptive analysis was conducted to ascertain the data's fundamental characteristics. We employed ANOVA and factor analysis to assess validity.

### CONCEPTUAL FRAMEWORK



## RESULTS

### FACTOR ANALYSIS

Factor Analysis (FA) is commonly employed to verify the foundational component structure of a set of measurement items. The values of observable variables are theoretically influenced by imperceptible influences. Model-based methodologies are employed in Factor Analysis. The primary objective of this research is to construct causal pathways that connect visible events, latent causes, and measurement errors.

The Kaiser-Meyer-Olkin (KMO) Method assesses the appropriateness of data for factor analysis. We confirm that the sample size is adequate to encompass all model variables. To ascertain the extent of common variance, numerous variables are subjected to statistical analysis. Factor analysis is more efficacious when utilised on data with lower percentages. A value between 0 and 1 is the outcome of executing KMO. A KMO score ranging from 0.8 to 1 signifies sufficient sampling.

If the KMO is below 0.6, sampling is inadequate, necessitating corrective measures. The precise value is at your discretion; nevertheless, several authors go for 0.5. The interval spans from 0.5 to 0.6.

The significance of partial correlations in relation to overall correlations becomes evident when the KMO approaches zero. To restate, robust correlations significantly hinder component analysis.

Kaiser has set down the subsequent criteria for acceptance:

Moderately between 0.050 and 0.059.

Diverging from the standard by 0.60 to 0.69

Middle school students often fall within the 0.70 to 0.79 range.

Possessing a quality point score ranging from 0.80 to 0.89.

The interval from 0.90 to 1.00 was astonishing.

KMO and Bartlett's Test <sup>a</sup>		
<b>Kaiser-Meyer-Olkin Measure of Sampling Adequacy.</b>		.957
<b>Bartlett's Test of Sphericity</b>	<b>Approx. Chi-Square</b>	6953.162
	<b>df</b>	190
	<b>Sig.</b>	.000
<b>a. Based on correlations</b>		

Bartlett's Test of Sphericity further confirmed the overall significance of the correlation matrices. The Kaiser-Meyer-Olkin sample adequacy value is 0.957. Researchers identified a p-value of 0.00 using Bartlett's sphericity test. The correlation matrix is invalid as Bartlett's sphericity test yielded a significant result.

#### ❖ INDEPENDENT VARIABLE

#### NUTRITIONAL INTERVENTION

Nutrition interventions are systematically designed programs intended to improve the health of individuals, communities, or groups by modifying dietary habits, increasing access to nutritious food, or addressing other environmental factors. Notwithstanding the increasing data about the cost-effectiveness of dietary treatments, numerous research persist in exhibiting methodological and assumption deficiencies.

#### ❖ FACTOR

#### METABOLIC STATE

There are three primary metabolic states: absorptive (fed), postabsorptive (fasting), and starving. Each condition influences the body's capacity to generate and utilise energy, encompassing processes such as anabolism (synthesis) and catabolism (decomposition).

#### ❖ DEPENDENT VARIABLE

#### ANXIETY MANAGEMENT

Anxiety, an uncomfortable condition, emerges through various physical, mental, and behavioural symptoms. Anxiety is prevalent and can function to enhance our resilience in challenging situations. Chronic, excessive, or maladaptive symptoms characterise the pathophysiology of anxiety disorders (Naveen et al., 2024).

#### ❖ RELATIONSHIP OF BETWEEN METABOLIC STATE AND ANXIETY MANAGEMENT

The treatment of anxiety is significantly affected by metabolic status due to the relationship between diet and psychological health. Metabolism activity throughout the body influences hormones, neurotransmitter equilibrium, and other biochemical indicators of the stress response. Nutrition deficits, insulin sensitivity, or carbohydrate metabolic abnormalities may influence anxiety and mood control in the brain. Dietary interventions, such modifications to

macronutrient intake or the incorporation of certain minerals and vitamins, can enhance metabolic health by mitigating inflammation and facilitating blood glucose regulation. This enhances both mental clarity and stress levels. Evidence suggests that nutritional supplements such as magnesium, omega-3 fatty acids, and B vitamins help enhance mood stability via regulating neurotransmitter. Better nutritional therapy to improve mental wellness can be formulated by comprehending the impact of metabolic abnormalities on the onset of anxiety (Norwitz & Naidoo, 2021).

Based on the preceding discussion, the researcher formulated the following hypothesis to analyse the relationship between metabolic state and anxiety management.

***H<sub>01</sub>: There is no significant influence of metabolic state on anxiety management”***

***H<sub>1</sub>: There is a significant influence of metabolic state on anxiety management”***

ANOVA					
Sum	Sum of Squares	df	Mean Square	F	Sig.
<b>Between Groups</b>	69588.620	287	5655.517	1573.953	.000
<b>Within Groups</b>	492.770	490	5.356		
<b>Total</b>	70081.390	777			

A significant discovery will arise from this inquiry. The p-value of .000 (below the .05 alpha level) indicates that the F value of 1573.953 is statistically significant. Given the rejection of the null hypothesis, we can conclude that “***H<sub>1</sub>: There is a significant influence of metabolic state on anxiety management”*** is accepted.

## DISCUSSION

A branch of metabolic medicine that enhances the management of metabolic disorders is the incorporation of lifestyle modifications in the treatment of mental health conditions. Nutrition is a form of metabolic medicine. Pathological correlates of anxiety disorders, emphasising inflammation and microbiome dysbiosis as potential factors. To illustrate anxiety as a metabolic problem, it is essential to address microbiome dysbiosis and inflammation, conditions that are particularly pertinent to anxiety disorders. The second piece of evidence-based knowledge regarding anxiety therapy activities is the existence of six dietary approaches. These encompass ensuring adequate vitamin D intake, eliminating artificial sweeteners and gluten, including omega-3 fatty acids and turmeric (curcumin) into your diet, and adhering to a ketogenic diet.

Evidence indicates a correlation between heightened intake of vegetable oils rich in linoleic acid and an elevated risk of cardiovascular disease, inflammation, and anxiety disorders. To achieve maximum physical, emotional, and cognitive health, it is imperative to substitute processed vegetable oils and refined carbohydrates with nutrient-dense foods. Nonetheless, we depend on the more specific nutritional and dietary interventions that have been studied concerning anxiety. Moreover, erythritol and stevia, two natural non-caloric and non-insulinogenic sugar alternatives, may be viable recommendations for patients in a practical therapeutic setting if they are reluctant to eliminate sweeteners entirely. This arises from the presumption that these sweeteners exert a diminished negative impact on insulin sensitivity and the microbiota, hence reducing the likelihood of inducing metabolic dysfunction. Ultimately, the most prudent course of action is to eliminate sugar and confections totally, as the absence of evidence does not inherently imply the absence of existence.

Coeliac disease is the sole recognised disorder in which a gluten-free diet may mitigate anxiety. Considering the mechanistic association with "leaky gut" and the correlations between zonulin and mental disorders, including anxiety, it is prudent to incorporate a gluten-free diet into the repertoire of metabolic interventions for anxiety. Furthermore, omega-3 fatty acids, particularly the long-chain variants eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA), exert beneficial effects on the microbiota, mental health, and cognition, serving as potent signalling molecules that mitigate inflammation. Comparing genetically modified mice capable of biosynthesising omega-3 and omega-6 fatty acids offers direct evidence that omega-3 fatty acids, alongside their comprehensive food sources, confer health benefits. Mice exhibiting enhanced microbiomes, diminished inflammation, and a reduced incidence of chronic diseases include those that biosynthesise omega-3 fatty acids and possess a lower omega-6 to omega-3 ratio, despite being fed the same food as control mice. Diets rich in omega-3 fatty acids have been shown to normalise dopamine levels and reduce anxiety-like behaviours in preclinical studies with rats with inflammation-induced anxiety. Consequently, omega-3 fatty acids can mitigate anxiety through many metabolic routes, including re-establishing microbial balance, reducing inflammation, and restoring neurochemical homeostasis.

Curcumin demonstrates potential as an anxiolytic based on preclinical studies in murine models. Curcumin therapy ameliorated anxiety-related behaviours in rats caused by a food preservative. Moreover, supplementary animal models of anxiety have demonstrated same results. Research indicates that curcumin not only enhances hormone and neurotransmitter levels but also significantly reduces anxiety-like behaviours. Nonetheless, one association study indicated that individuals with severe vitamin D insufficiency exhibited significantly elevated anxiety levels, suggesting that vitamin D treatment alone may not suffice to mitigate anxiety. Notwithstanding the significance of vitamin D for

overall health, vitamin D deficiency remains an issue in the United States. Individuals residing at elevated latitudes encounter greater difficulty in obtaining sufficient vitamin D from dietary sources or sunlight exposure. Given that most worried patients exhibit inadequate vitamin D levels and that supplementation may confer advantageous health effects, further investigation is warranted.

Finally, ketogenic diets assist in addressing inflammation, neurotransmitter imbalances, oxidative stress, glucose hypometabolism, and other biological pathologies associated with neurological and mental illnesses. In the absence of carbohydrates, the liver synthesises ketones. These compounds function as superior fuel substrates for the brain and additionally serve as signalling molecules. They interact with their respective G-protein coupled receptors, inhibit histone deacetylases, directly modify histones, affect the gut microbiome, enhance gut barrier function, and reduce inflammation and oxidative stress, among other effects.

## CONCLUSION

Anxiety disorders can be mitigated with dietary interventions that address metabolic and neurological dysfunctions, as evidenced by scientific rationale and translational data. Metabolic diseases, in addition to being predominantly psychological disorders, encompass anxiety and other mental health issues. Conversely, metabolic pharmacotherapy is suitable for metabolic diseases. Daily, patients and clinicians partake in discussions concerning diet, a form of metabolic medicine. To offer thorough alleviation for individuals experiencing anxiety, it is essential to employ this metabolic technique. Nonetheless, bio-individuality continues to pose a considerable challenge in therapeutic practice. Deficits and comorbidities present uniquely in each patient. The study subjects possess distinct microbiomes and exhibit genetic differences. To convert nutritional psychiatry into precision personalised medicine, the medical community must undertake future investigations to elucidate the mechanisms by which various therapies operate.

## REFERENCES

1. Aucoin, M., LaChance, L., Naidoo, U., Remy, D., Shekdar, T., Sayar, N., ... & Cooley, K. (2021). Diet and anxiety: a scoping review. *Nutrients*, 13(12), 4418.
2. Norwitz, N. G., & Naidoo, U. (2021). Nutrition as metabolic treatment for anxiety. *Frontiers in psychiatry*, 12, 598119.
3. Psychiatry.org (2025). What are Anxiety Disorders?
4. Luo, H., Jiang, Z. L., & Ren, Y. (2021). Therapy management of metabolic disorder comorbidity with depression. *Frontiers in psychology*, 12, 683320.
5. Naveen, V., Felic, S., ASWIN, A., & ARUL, P. K. (2024). A Review on Current Understanding, Clinical Manifestations, and Therapeutic Approaches of Anxiety Disorders. *Journal of Pharma Insights and Research*, 2(5), 173-181.
6. Pilecki, B., Luoma, J. B., Bathje, G. J., Rhea, J., & Narloch, V. F. (2021). Ethical and legal issues in psychedelic harm reduction and integration therapy. *Harm Reduction Journal*, 18(1), 40.
7. Staudacher, H. M., Teasdale, S., Cowan, C., Opie, R., Rocks, T., & Jacka, F. N. (2023). Diet interventions for anxiety and depression. *Nutritional Psychiatry: A Primer for Clinicians*; Dinan, T., Ed, 72-100.
8. Luo, H., Jiang, Z. L., & Ren, Y. (2021). Therapy management of metabolic disorder comorbidity with depression. *Frontiers in psychology*, 12, 683320.