

Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

Elsevier hereby grants permission to make all its COVID-19-related research that is available on the COVID-19 resource centre - including this research content - immediately available in PubMed Central and other publicly funded repositories, such as the WHO COVID database with rights for unrestricted research re-use and analyses in any form or by any means with acknowledgement of the original source. These permissions are granted for free by Elsevier for as long as the COVID-19 resource centre remains active.



Contents lists available at ScienceDirect

NFS Journal



journal homepage: www.elsevier.com/locate/nfs

The potential role of nutrition in mitigating the psychological impact of COVID-19 in healthcare workers

Silvia Irene Maffoni^a, Aliki Kalmpourtzidou^{b,*}, Hellas Cena^{a,b}

^a Clinical Nutrition and Dietetics Service, Unit of Internal Medicine and Endocrinology, ICS Maugeri IRCCS, Pavia, Italy
^b Laboratory of Dietetics and Clinical Nutrition, Department of Public Health, Experimental and Forensic Medicine, University of Pavia, Pavia, Italy

ARTICLE INFO	RTICLE INF	IFC)
--------------	------------	-----	---

Keywords: Covid-19 Healthcare workers Nutrition Stress

ABSTRACT

Healthcare professionals are exposed to several stress factors, especially during health emergency situations like Covid-19. Psychological distress in the COVID-19 era adversely affects both healthcare professionals' mental and physical health, decreasing performance and efficiency at work. Nevertheless, no sufficient emphasis has been placed so far on the role of nutrition against stress and anxiety among healthcare professionals. Consequently, worksite health promotion approaches and interventions are highly recommended, but also National Health Systems are praised to develop strategies and policies to satisfy nutritional requirements in health emergencies such as Covid-19 pandemic. In this brief paper, the important role of nutrition during periods of stress is highlighted, providing nutritional advice to enhance resilience in this risk group. In addition, practical lifestyle and diet tips for stress management among healthcare professionals exposed to Covid-19 are reported in this mini review.

The goal of this brief article is to highlight the important role of nutrition for mental health of COVID-19 frontline healthcare workers (HCW) and to provide nutritional advice for stress and mental burden prevention in this risk group (Table 1). Only in Italy, more than 10.000 HCW have been infected during the medical emergency between March 23 and April 9, 2020 [1]. Lifestyle and social intercourse of most HCW has changed in order to avoid the spread of infection, adopting social isolation.

The psychological impact of COVID-19 was analyzed firstly in China, and then considered in the rest of the world [1–3]. Most studies, reported a high prevalence of anxiety and depressive symptoms [1–6], and according to Barquehais et al. (2020), HCW with higher clinical responsibilities were at a higher risk for psychological distress, as well as those living in regions with higher rate of COVID-19 infection [1]. Consequently, their habitual lifestyle, including food consumption, eating behavior, water intake and stimulant substances consumption, such as caffeine underwent important changes due to stress factors at work, impacting nutritional status, immunity response, sleep and mental health [7,8]. In the general population, unhealthy food choices with consequent inadequate nutrient intake, water restriction, with consequent dehydration, as well as caffeine, energy drinks and alcohol consumption with consequent sleep disturbances, have been observed worldwide [9,10]. However to our knowledge only Zhang et al. (2020) reported an unbalanced diet specifically among COVID-19 HCW with high consumption of salt and oil in China [11].

On the other hand a very large body of evidence suggests that diet is as important to mental health as it is to physical health and nutrientdense foods like the ones of the Mediterranean diet [12] may actually prevent mood disorders [13] as well as manage stress [14,15]. Villegas et al. (2009) reported an inverse association between Mediterranean diet and clinical depression [16]; hence a Mediterranean-style dietary pattern may preserve mental health from stress conditions, reinforcing HCW's psychological response to COVID-19 emergency. Prolonged stress triggers inflammation and affects immune response [17]. Therefore, a high consumption of nutrients that positively impact inflammation, including monounsaturated fatty acids (MUFAs), mainly in olive oil [18], and ω -3 fatty acids, mainly in fish [19,20], provide both directly and indirectly beneficial effects to anxiety, psychological stress, mood disorders as well as improvement of related symptoms [15,21–23].

Additionally, evidence supports that intake of certain types of micronutrients, including vitamin B complex [24], folate [25], zinc [26,27], magnesium [27,28], selenium [27] positively influence mood status and mental health promoting stress prevention.

Greater consumption of specific food groups and limited intake of

* Corresponding author. *E-mail addresses:* alikikalb@hotmail.com (Kalmpourtzidou), hellas.cena@unipv.it (H. Cena).

https://doi.org/10.1016/j.nfs.2020.12.002

Received 20 November 2020; Received in revised form 7 December 2020; Accepted 7 December 2020 Available online 13 December 2020 2352-3646/@ 2020 The Authors Published by Elsevier GmbH on behalf of Society of Nutrition and Foor

2352-3646/© 2020 The Authors. Published by Elsevier GmbH on behalf of Society of Nutrition and Food Science e.V. This is an open access article under the CC BY-NC-ND license (http://restivecommons.org/license/hy-nc-nd/4.0/).

Table 1

Practical tips for diet, sleep and physical activity in stress management among frontline healthcare workers exposed to Covid-19.

Eating and lifestyle behaviours	Food for mental health
A Mediterranean-style diet (a diet rich of fruits, vegetables, wholegrain carbohydrates and cereals, dairy products, nuts, and extra virgin olive oil, a moderate consumption of eggs, poultry, red wine, fish and legumes and a low intake of saturated fat like butter, red meat and sweets)	Adequate water intake against dehydration (At least 2.5 l for man and 2 l for women, other sources of water: juices without added sugars, tea, salty broths and fruits and vegetable with high-water concentration)
Adequate sleep duration (7 to 9 h for adults from 18 to 64 years old)	Moderate caffeine consumption [45] (Avoidance of energy drinks, maximum 400 mg of caffeine per day for coffee and tea, 240 ml of tea could contain between 30 and 50 mg and 240 ml of coffee could contain between 80 and 100 mg of caffeine)
Moderate physical activity combining aerobic and muscle-strengthening activities and limitation of the time being sedentary [48] No meals skipping	Low alcohol consumption [49] (Preferably avoidance of alcohol consumption, up to 1 drink for women and 2 drinks for men per day) Food sources rich in MUFAs (eg. olive oil)
Homemade meals	Food sources rich in probiotics (eg. yogurt, kefir) Food sources rich in ω -3 fatty acids (eg. fatty fish) Food sources rich in micronutrients with beneficial effects on stress and mental health (eg. vitamin B complex, folate, zinc, magnesium, selenium)

unhealthy options are intrinsic to the eating habits of certain regional dietary patterns such as the Mediterranean one [29]. This is essentially a plant-base diet rich in all the nutrients reported above, aside from fibre and prebiotics, which produce favorable changes in the commensal gut microbiome and reduce host vulnerability to stress-induced disruptions [30]. Recently studies are focusing on the impact of prebiotics and probiotics on gut microbiota, stress reactivity and mood response [31]. Probiotics in particular showed good prospects in relieving stress and preventing stress-related health problems [32]. They are microorganisms that can be supplemented or contained in fortified foods as well as in fermented ones, including yogurt and kefir [33,34]. A metanalysis by Chao et al. (2020), suggested that probiotics could even be an adjunct therapy for mood and anxiety disorders [35]. Noteworthy prolonged stress leads not only to functional nervous diseases, but also to organic conditions altering protective immune responses [36,37], increasing susceptibility to illness after exposure to infectious agents [38]. HCW during this pandemic emergency are the most exposed to stress susceptibility and should be provided with recommendations on adequate choices about food, eating behavior as well as hydration.

Aside from a healthy dietary pattern, rich in plant-based food as the Mediterranean diet, they should be advised on making healthy drink choices. According to the European Food Safety Authority (EFSA), adult men and women should consume at least 2.5 and 21 of water, respectively [39]. In addition to the important role of hydration for physiological needs, adequate water intake seems to be important for mental health. Masento et al. (2014) suggested that water consumption may improve cognitive performance including visual attention, short term memory, reaction time and mood status [40]. Prolonged operations wearing personal protection equipment (PPE) accelerate fatigue and dehydration as a consequence of profuse sweating, due also to hospitals' high room temperature. Thus, in order for HCWs to meet the daily water recommendations they should consume water also in other forms: juices without added sugars, tea, salty broths and fruits and vegetable with high-water concentration. Avoidance of high coffee and energy drinks consumption is also suggested in order to eliminate the anxiogenic effect and eventual sleeping disorder. Caffeine increases cortisol secretion in

people undergoing mental stress [41], impairing neuroendocrine response, circadian rhythm and hence affecting cognitive functions and performance, body weight, diet quality and mood [42]. Furthermore the combination of stress and caffeine causes additive increases in Blood Pressure [43,44]. Therefore, HCW should be recommended to avoid coffee and energy drinks excessive consumption, not exceeding 400 mg of caffeine per day, equivalent to no more than 4–5 cups of coffee per day [45], substituting them with naturally caffeine-free beverages (infusions or fresh juices and smoothies) or decaffeinated drinks. Additionally, according to National Sleep Foundation recommendations, adults from 18 to 64 years old should sleep from 7 to 9 h per day [46].

Finally, healthy eating behavior should be facilitated by workplace environment. National Health Systems should consider workforce needs and demands and develop strategies and policies to satisfy also dietary needs in health emergencies such as Covid-19 pandemic. Worksite health promotion approaches and interventions have been recommended internationally by health organizations and researchers as an effective way to better manage mental health, stress and nutrition during health emergencies [47]. HCW should be given available time and space in the hospitals where they could eat their homemade meals, drink water and a canteen with healthy food choices. If not, there is the risk that HCW make fast and unhealthy food choices, fasting all day and/or binging once off from work to relive stress by means of comfort foods such as fast food and snacks, energy-dense and nutrient poor foods. As a result, HCW may be unable to restore an adequate nutritional status, which is crucial to cope with continuous stress and maintain immune integrity.

Funding

This research received no external funding.

Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

References

- [1] M.D. Braquehais, S. Vargas-Cáceres, E. Gómez-Durán, G. Nieva, S. Valero, M. Casas, E. Bruguera, The impact of the COVID-19 pandemic on the mental health of healthcare professionals, QJM An Int. J. Med. (2020), https://doi.org/10.1093/ gimed/hcaa207.
- [2] X. Xiao, X. Zhu, S. Fu, Y. Hu, X. Li, J. Xiao, Psychological impact of healthcare workers in China during COVID-19 pneumonia epidemic: a multi-center crosssectional survey investigation, J. Affect. Disord. 274 (2020) 405–410, https://doi. org/10.1016/j.jad.2020.05.081.
- [3] M. Luo, L. Guo, M. Yu, H. Wang, The psychological and mental impact of coronavirus disease 2019 (COVID-19) on medical staff and general public – A systematic review and meta-analysis, Psychiatry Res. 291 (2020) 113190, https:// doi.org/10.1016/j.psychres.2020.113190.
- [4] E. Preti, V. Di Mattei, G. Perego, F. Ferrari, M. Mazzetti, P. Taranto, R. Di Pierro, F. Madeddu, R. Calati, The psychological impact of epidemic and pandemic outbreaks on healthcare workers: rapid review of the evidence, Curr. Psychiatry Rep. (2020) 22, https://doi.org/10.1007/s11920-020-01166-z.
- [5] M.S. Spoorthy, Mental health problems faced by healthcare workers due to the COVID-19 pandemic–A review, Asian J. Psychiatr. 51 (2020) 102119, https://doi. org/10.1016/j.ajp.2020.102119.
- [6] N. Talaee, M. Varahram, H. Jamaati, A. Salimi, M. Attarchi, M. Kazempour Dizaji, M. Sadr, S. Hassani, B. Farzanegan, F. Monjazebi, S.M. Seyedmehdi, Stress and burnout in health care workers during COVID-19 pandemic: validation of a questionnaire, Aust. J. Public Health 1 (2020), https://doi.org/10.1007/s10389-020-01313-z.
- [7] H. Jahrami, A.S. BaHammam, H. AlGahtani, A. Ebrahim, M.A.I. Faris, K. AlEid, Z. Saif, E. Haji, A. Dhahi, H. Marzooq, S. Hubail, Z. Hasan, The examination of sleep quality for frontline healthcare workers during the outbreak of COVID-19, Sleep Breath. 1 (2020), https://doi.org/10.1007/s11325-020-02135-9.
- [8] L. Ferini-Strambi, M. Zucconi, F. Casoni, M. Salsone, COVID-19 and sleep in medical staff: reflections, clinical evidences, and perspectives, Curr. Treat. Options Neurol. 22 (2020) 29, https://doi.org/10.1007/s11940-020-00642-4.
- [9] L. Di Renzo, P. Gualtieri, F. Pivari, L. Soldati, A. Attinà, G. Cinelli, G. Cinelli, C. Leggeri, G. Caparello, L. Barrea, F. Scerbo, E. Esposito, A. De Lorenzo, Eating habits and lifestyle changes during COVID-19 lockdown: An Italian survey, J. Transl. Med. 18 (2020), https://doi.org/10.1186/s12967-020-02399-5.

- [10] R. Zupo, F. Castellana, R. Sardone, A. Sila, V.A. Giagulli, V. Triggiani, R.I. Cincione, G. Giannelli, G. De Pergola, Preliminary trajectories in dietary behaviors during the COVID-19 pandemic: a public health call to action to face obesity, Int. J. Environ. Res. Public Health 17 (2020) 7073, https://doi.org/10.3390/ijerph17197073.
- [11] J. Zhang, S. Lai, Q. Lyu, P. Zhang, D. Yang, J. Kong, Y. Qi, W. Yuan, S. Zeng, P. Song, T. Yang, L. Li, J. Wang, Y. Liu, T. Ge, Q. Zhang, G. Feng, A. Liu, G. Ding, Diet and nutrition of healthcare workers in COVID-19 epidemic—Hubei, China, 2019, China CDC Wkly. 2 (2020) 505–506, https://doi.org/10.46234/ ccdcw2020.121.
- [12] C. Davis, J. Bryan, J. Hodgson, K. Murphy, Definition of the mediterranean diet: a literature review, Nutrients. 7 (2015) 9139–9153, https://doi.org/10.3390/ nu7115459.
- [13] T. Sathyanarayana Rao, M. Asha, B. Ramesh, K. Jagannatha Rao, Understanding nutrition, depression and mental illnesses, Indian J. Psychiatry 50 (2008) 77, https://doi.org/10.4103/0019-5545.42391.
- [14] M.J. Gonzalez, J.R. Miranda-Massari, Diet and stress, Psychiatr. Clin. North Am. 37 (2014) 579–589, https://doi.org/10.1016/j.psc.2014.08.004.
- [15] F.N. Jacka, A. Mykletun, M. Berk, Moving towards a population health approach to the primary prevention of common mental disorders, BMC Med. 10 (2012), https://doi.org/10.1186/1741-7015-10-149.
- [16] A. Sánchez-Villegas, M. Delgado-Rodríguez, A. Alonso, J. Schlatter, F. Lahortiga, L. Serra-Majem, M.A. Martínez-González, Association of the Mediterranean dietary pattern with the incidence of depression: the Seguimiento Universidad de Navarra/ University of Navarra follow-up (SUN) cohort, Arch. Gen. Psychiatry 66 (2009) 1090–1098, https://doi.org/10.1001/archgenpsychiatry.2009.129.
- [17] S.C. Segerstrom, G.E. Miller, Psychological Stress and the Human Immune System: A Meta-Analytic Study of 30 Years of Inquiry NIH Public Access, 2004.
- [18] L. Schwingshackl, G. Hoffmann, Monounsaturated fatty acids, olive oil and health status: A systematic review and meta-analysis of cohort studies, Lipids Health Dis. 13 (2014), https://doi.org/10.1186/1476-511X-13-154.
- [19] C. Galli, F. Marangoni, N-3 fatty acids in the Mediterranean diet, Prostaglandins Leukot. Essent. Fat. Acids 75 (2006) 129–133, https://doi.org/10.1016/j. plefa.2006.05.007.
- [20] A. Sánchez-Villegas, L. Verberne, J. de Irala, M. Ruíz-Canela, E. Toledo, L. Serra-Majem, M.A. Martínez-González, Dietary fat intake and the risk of depression: the SUN project, PLoS One 6 (2011), https://doi.org/10.1371/journal.pone.0016268.
- [21] Q. Huang, H. Liu, K. Suzuki, S. Ma, C. Liu, Linking what we eat to our mood: a review of diet, dietary antioxidants, and depression, Antioxidants 8 (2019), https://doi.org/10.3390/antiox8090376.
- [22] T. Larrieu, S. Layé, Food for mood: Relevance of nutritional omega-3 fatty acids for depression and anxiety, Front. Physiol. 9 (2018), https://doi.org/10.3389/ fphys.2018.01047.
- [23] K.P. Su, P.T. Tseng, P.Y. Lin, R. Okubo, T.Y. Chen, Y.W. Chen, Y.J. Matsuoka, Association of use of Omega-3 polyunsaturated fatty acids with changes in severity of anxiety symptoms: a systematic review and meta-analysis, JAMA Netw. Open 1 (2018) e182327, https://doi.org/10.1001/jamanetworkopen.2018.2327.
- [24] L.M. Young, A. Pipingas, D.J. White, S. Gauci, A. Scholey, A systematic review and meta-analysis of b vitamin supplementation on depressive symptoms, anxiety, and stress: effects on healthy and 'at-risk' individuals, Nutrients 11 (2019), https://doi. org/10.3390/nu11092232.
- [25] S.N. Young, Folate and depression a neglected problem, J. Psychiatry Neurosci. 32 (2007) 80–82. www.ccnp.ca (Accessed October 20, 2020).
 [26] E. Ranjbar, M.S. Kasaei, M. Mohammad-Shirazi, J. Nasrollahzadeh, B. Rashidkhani,
- [26] E. Ranjbar, M.S. Kasaei, M. Mohammad-Shirazi, J. Nasrollahzadeh, B. Rashidkhani, J. Shams, S.A. Mostafavi, M.R. Mohammadi, Effects of zinc supplementation in patients with major depression: a randomized clinical trial, Iran. J. Psychiatry 8 (2013) 73–79. /pmc/articles/PMC3796297/?report=abstract (Accessed October 20, 2020).
- [27] J. Wang, P. Um, B.A. Dickerman, J. Liu, Zinc, magnesium, selenium and depression: a review of the evidence, potential mechanisms and implications, Nutrients 10 (2018), https://doi.org/10.3390/nu10050584.
- [28] N.B. Boyle, C. Lawton, L. Dye, The effects of magnesium supplementation on subjective anxiety and stress—a systematic review, Nutrients 9 (2017), https://doi. org/10.3390/nu9050429.
- [29] H. Cena, P.C. Calder, Defining a healthy diet: evidence for the role of contemporary dietary patterns in health and disease, Nutrients. 12 (2020) 334, https://doi.org/ 10.3390/nu12020334.

- [30] R.S. Thompson, F. Vargas, P.C. Dorrestein, M. Chichlowski, B.M. Berg, M. Fleshner, Dietary prebiotics alter novel microbial dependent fecal metabolites that improve sleep, Sci. Rep. 10 (2020) 1–14, https://doi.org/10.1038/s41598-020-60679-y.
- [31] A. Madison, J.K. Kiecolt-Glaser, Stress, depression, diet, and the gut microbiota: human–bacteria interactions at the core of psychoneuroimmunology and nutrition, Curr. Opin. Behav. Sci. 28 (2019) 105–110, https://doi.org/10.1016/j. cobeha.2019.01.011.
- [32] N. Zhang, X. Liao, Y. Zhang, M. Li, W. Wang, S. Zhai, Probiotic supplements for relieving stress in healthy participants: A protocol for systematic review and metaanalysis of randomized controlled trials, Medicine (Baltimore) 98 (2019) e15416, https://doi.org/10.1097/MD.000000000015416.
- [33] M. Kechagia, D. Basoulis, S. Konstantopoulou, D. Dimitriadi, K. Gyftopoulou, N. Skarmoutsou, E.M. Fakiri, Health benefits of probiotics: a review, ISRN Nutr. 2013 (2013) 1–7, https://doi.org/10.5402/2013/481651.
- [34] E.R. Leeming, A.J. Johnson, T.D. Spector, C.I. Le Roy, Effect of diet on the gut microbiota: rethinking intervention duration, Nutrients. 11 (2019) 2862, https:// doi.org/10.3390/nu11122862.
- [35] L. Chao, C. Liu, S. Sutthawongwadee, Y. Li, W. Lv, W. Chen, L. Yu, J. Zhou, A. Guo, Z. Li, S. Guo, Effects of probiotics on depressive or anxiety variables in healthy participants under stress conditions or with a depressive or anxiety diagnosis: a meta-analysis of randomized controlled trials, Front. Neurol. 11 (2020) 421, https://doi.org/10.3389/fneur.2020.00421.
- [36] M. Jackson, The art of medicine: the stress of life: a modern complaint? Lancet. 383 (2014) 300–301, https://doi.org/10.1016/S0140-6736(14)60093-3.
- [37] Y.-S. Bae, E.-C. Shin, Y.-S. Bae, W. Van Eden, Editorial: stress and immunity, Front. Immunol. 10 (2019) 245, https://doi.org/10.3389/fimmu.2019.00245.
- [38] L.M. Christian, R. Glaser, The impact of everyday stressors on the immune system and health, in: Stress Challenges Immun. Sp. From Mech. to Monit. Prev. Strateg., Springer-Verlag Berlin Heidelberg, 2012, pp. 31–43, https://doi.org/10.1007/978-3-642-22272-6_4.
- [39] Scientific opinion on dietary reference values for water, EFSA J. 8 (2016), https:// doi.org/10.2903/j.efsa.2010.1459.
- [40] N.A. Masento, M. Golightly, D.T. Field, L.T. Butler, C.M. Van Reekum, Effects of hydration status on cognitive performance and mood, Br. J. Nutr. 111 (2014) 1841–1852, https://doi.org/10.1017/S0007114513004455.
- [41] W.R. Lovallo, T.L. Whitsett, M. Al'Absi, B.H. Sung, A.S. Vincent, M.F. Wilson, Caffeine stimulation of cortisol secretion across the waking hours in relation to caffeine intake levels, Psychosom. Med. 67 (2005) 734–739, https://doi.org/ 10.1097/01.psy.0000181270.20036.06.
- [42] G.K. Pot, Sleep and dietary habits in the urban environment: The role of chrononutrition, in: Proc. Nutr. Soc., Cambridge University Press, 2018, pp. 189–198, https://doi.org/10.1017/S0029665117003974.
- [43] J.D. Shepard, M. Al'Absi, T.L. Whitsett, R.B. Passey, W.R. Lovallo, Additive pressor effects of caffeine and stress in male medical students at risk for hypertension, Am. J. Hypertens. 13 (2000) 475–481, https://doi.org/10.1016/s0895-7061(99) 00217-4.
- [44] R. De Giuseppe, I. Di Napoli, F. Granata, A. Mottolese, H. Cena, Caffeine and blood pressure: a critical review perspective, Nutr. Res. Rev. 32 (2019) 169–175, https:// doi.org/10.1017/S0954422419000015.
- [45] Spilling the Beans: How Much Caffeine is Too Much?, FDA, 2018. https://www.fda .gov/consumers/consumer-updates/spilling-beans-how-much-caffeine-too-much (accessed December 4, 2020).
- [46] M. Hirshkowitz, K. Whiton, S.M. Albert, C. Alessi, O. Bruni, L. DonCarlos, N. Hazen, J. Herman, E.S. Katz, L. Kheirandish-Gozal, D.N. Neubauer, A. E. O'Donnell, M. Ohayon, J. Peever, R. Rawding, R.C. Sachdeva, B. Setters, M. V. Vitiello, J.C. Ware, P.J. Adams Hillard, National sleep foundation's sleep time duration recommendations: methodology and results summary, Sleep Heal. 1 (2015) 40–43, https://doi.org/10.1016/j.sleh.2014.12.010.
- [47] L. Quintiliani, S. Poulsen, G. Sorensen, Healthy eating strategies in the workplace, Int. J. Workplace Health Manag. 3 (2010) 182–196, https://doi.org/10.1108/ 17538351011078929.
- [48] World Health Organization, Global Action Plan on Physical Activity 2018–2030: More Active People for a Healthier World, 2018.
- [49] U.S.D. of H. and H.S. and U.S.D. of Agriculture, 2015–2020 Dietary Guidelines for Americans, 2015–2020 Diet, in: Guidel. Am., 2015.