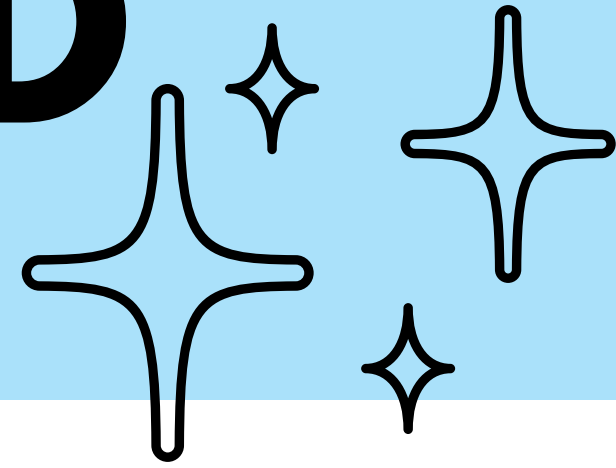


Relationship Between Mental and Physical Health

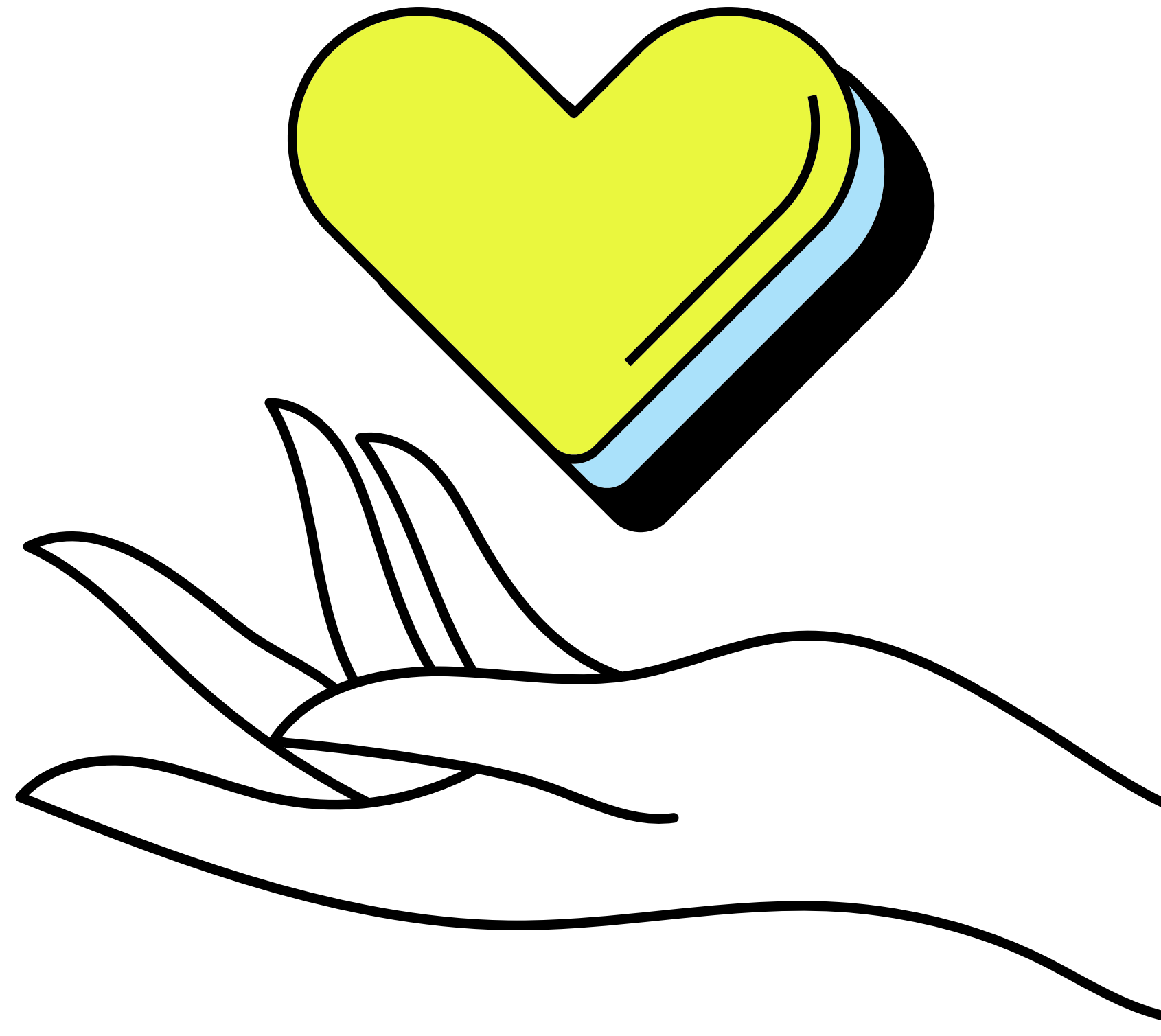
By: Madison Hahn



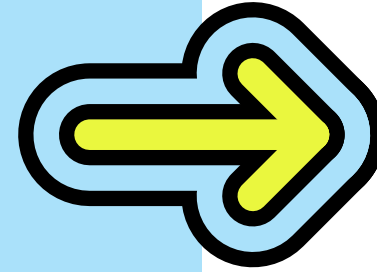
TOPICS BEING DISCUSSED



- ♥ The basic relationship
- ♥ Influences on children
- ♥ The affect of stress on the body
- ♥ Obesity and depression
- ♥ Chronic pain/illness
- ♥ How individuals can improve their well-being

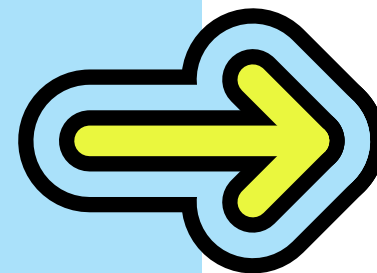


The Basic Relationship



THE MIND BODY CONNECTION

How these two factors are connected



THE EFFECTS OF BAD MENTAL HEALTH

Depression and anxiety and the physical effects of each

THE BASIC RELATIONSHIP

The Mind-Body Connection



- The mind and the body are interconnected in a close knit relationship
- The brain areas that control movement are connected to areas pertaining to thinking and planning
 - It is also connected to blood pressure and heart rate
 - SOME EXAMPLES
 - anxiety makes people pace
 - stimulating vagus nerve regulates heartrate or digestion
 - daily exercise improves mental health
 - Meditation
 - calming the mind can also calm the body
- research in relation to “mind-body” started with Penfield
- a recent study used fMRI to look at the brains motor strip
 - the brain is designed to help one survive
- pain is the most powerful feedback compared to happiness or sadness.

(Bhandari, 2023)

THE BASIC RELATIONSHIP

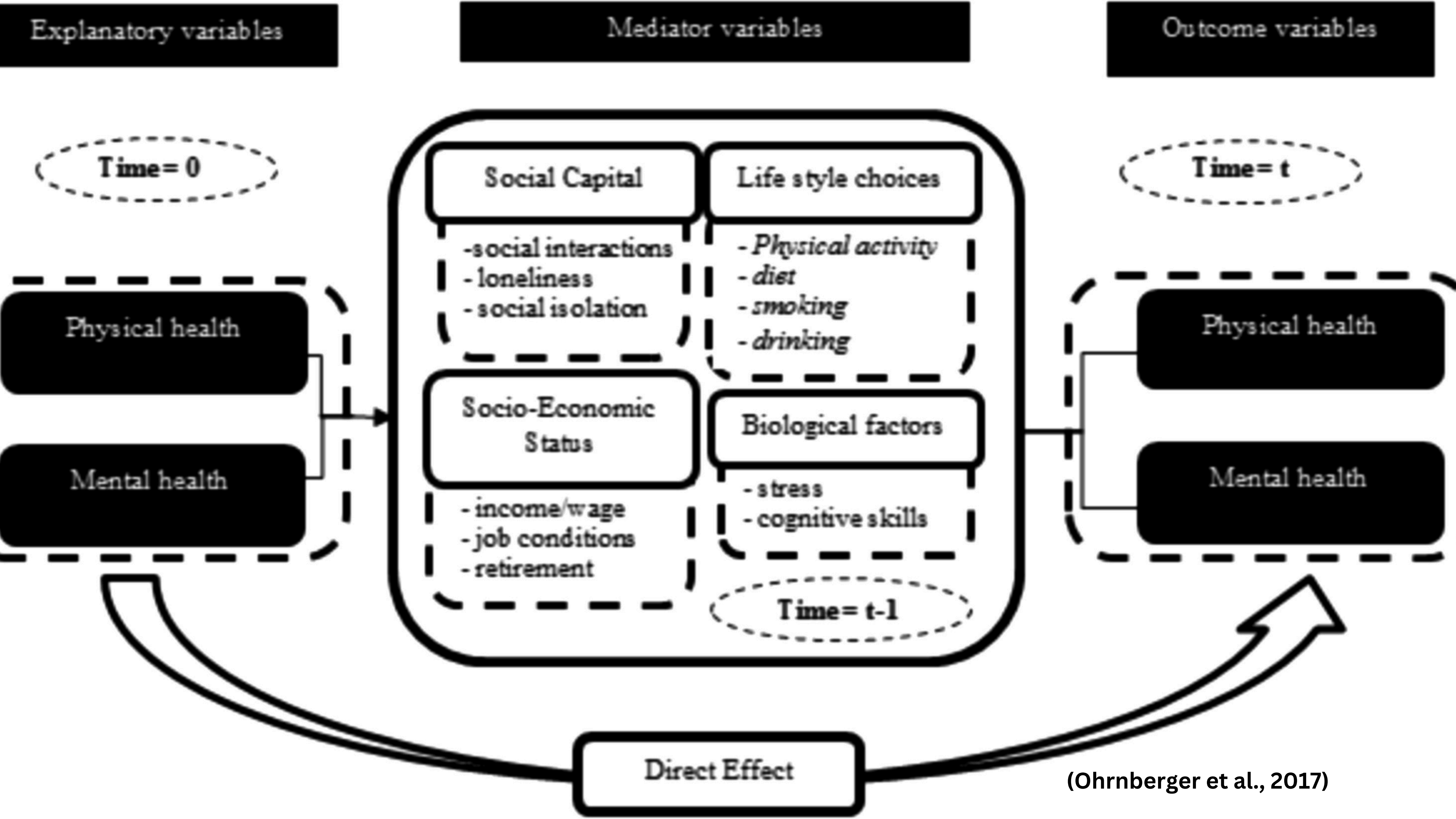
The Mind- Body Connection Cont.



- 55% of the burden of disease amongst the population aged 60+ is avoidable by change in lifestyle
 - changing diet
 - exercising more
 - sleeping 8+ hours a night
- Health is directed by medical care and lifestyle
- Physical and mental health can be impacted by employment
- Mental health can effect the physical health
 - Ex: depression makes it hard to go to doctor visits causing impact on physical health
- lifestyle choices
- low-quality diet, loneliness and social isolation < mortality risk

(Ohrnberger et al., 2017)



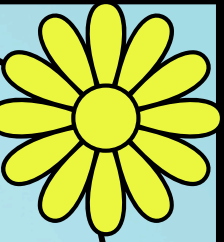


Influences of Chronic Conditions in Children



(Schuchard et al., 2022)

- children and adolescents have slightly different statistics than adults when comparing the relationship between mental and physical health
- most common conditions are ADHD and asthma
- children with either a physical or mental health condition have a similar overall life satisfaction compared to children who don't have a chronic condition
- **CHRONIC PAIN AND DEPRESSION RESULT IN LOWER LIFE SATISFACTION**
- In a study, 95% of children with depression had another chronic condition accompanying it
 - this might be due to an increase in persistent emotional distress
- children with chronic conditions are more likely to develop mental health conditions
 - depression, anxiety, OCD
- **lower income=lower health=lower life satisfaction**



Stress-Induced Depression

(Seo et al., 2016)



- Long-term stress can make a specific brain protein called p11 disappear in a part of the brain
- The **p11 protein** is mainly found in certain neurons in a region of the brain called the **medial prefrontal cortex**.
- When exposed to prolonged stress, the levels of p11 decrease in specific neurons in the prefrontal cortex
- Blocking the production of p11 in the prefrontal cortex also causes people to exhibit behaviors associated with depression.
- Using antidepressant medications can restore the levels of p11 in the prefrontal cortex and improve depression-like behaviors
- Although stress-related depression symptoms can last for a while, they can eventually get better over time, and the levels of p11 in the brain return to normal.



JOURNAL ANALYSIS

Obesity and Depression



Treatment Strategies:

- Combining lifestyle interventions
- Research on metabolic and neurobiological mechanisms connecting obesity and mental health

(Fulton et al., 2022)

Link between Obesity and Depression/Anxiety:

- Bidirectional association between being overweight (BMI \geq 25–29.99) and depression, stronger for obesity (BMI \geq 30).
- Obese adults have 23–36% increased odds of developing depressed mood
- Longitudinal analysis suggests a 40% increased risk of depression in obese adolescents
- Obesity increases the odds of anxiety disorder or symptoms by 30–40%, with a stronger relationship in severe obesity (BMI \geq 35)

Impact on Mental and Physical Health:

- Depression and anxiety in obese individuals have significant mental and physical consequences.
- Cognitive impairments
- poorer performance on cognitive tasks, comorbid depression.

Physical Activity and Sedentary Lifestyle:

- Mood disorders can lead to reduced physical activity, contributing to obesity and cardiovascular issues.
- A sedentary lifestyle contributes to vascular problems, inflammation, reduced brain blood flow, and neuroinflammation.

Chronic Pain



(Crofford, 2015)

Introduction to Chronic Pain:

- Chronic pain is a feared and challenging symptom for both patients and clinicians.
- It demands attention, intruding into every aspect of a person's life, and often makes clinicians feel helpless.

Definition of Pain:

- Defined by the International Association for the Study of Pain as an unpleasant sensory and emotional experience associated with actual or potential tissue damage.
- Pain is subjective, influenced by individual experiences, and not always linked to tissue damage.

Chronic Pain Conte.



(Crofford, 2015)

Dimensions of Pain:

- Sensory dimension: Where and how much does it hurt?
- Emotional dimension: How unpleasant is the experience?
- Cognitive dimension: Interpretation based on past experiences, causing fear, anxiety, and influencing responses.

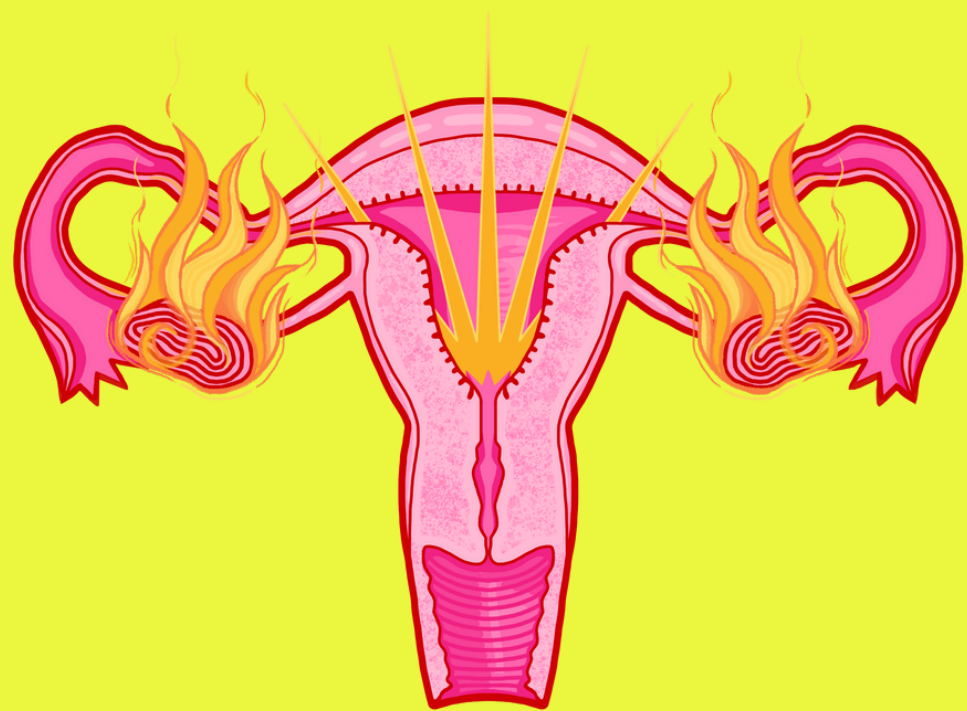
Classification of Chronic Pain:

- Acute pain arises from tissue damage (nociceptive pain).
- Neuropathic pain results from lesions or diseases of the somatosensory nervous system.
- Chronic pain lasts more than 3 months, often involving central sensitization.

Prevalence and Clustering:

- Chronic regional pain affects 20-25% of the population, while chronic widespread pain affects around 10%.
- Pain conditions often cluster

Chronic Pain Conte.



(Crofford, 2015)

Body and Brain Connection:

- Historical view shows the interplay between musculoskeletal pain and psychological distress.
- Fibromyalgia, involves higher symptom levels without consistent tissue abnormalities.

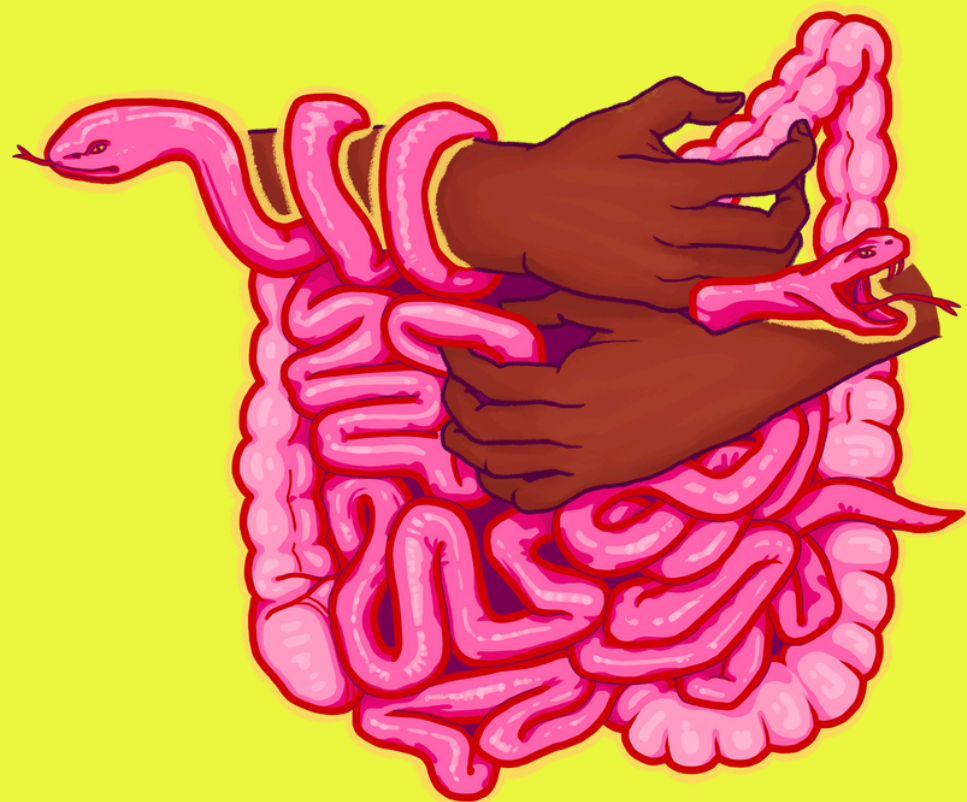
Genetic and Environmental Factors:

- anxiety and depression contribute to an individual's predisposition to central pain amplification
- Environmental triggers can lead to the transition from acute to chronic pain

Stress, Arousal, and Chronic Pain:

- Centrally mediated chronic pain is associated with stressful events, and symptoms fluctuate based on perceived stress.
- Studies focus on the hypothalamic-pituitary-adrenal axis (HPA) and autonomic nervous system (ANS) alterations

Chronic Pain Conte.



(Crofford, 2015)

Self-Regulation in Chronic Pain:

- Successful adaptation depends on an individual's ability to self-regulate.
- Patients with chronic pain may display adverse health behaviors due to depleted self-regulatory strength.


Treatment Approaches:

- Analgesics, antidepressants, and agents reducing neuronal excitability are common treatments.
- Opioids are often ineffective and pose societal issues; there is a need for better understanding and development of new treatment strategies.
- Empathy and time from clinicians play a crucial role in supporting patients with chronic pain.

Conclusion:

- While complete elimination of chronic pain may not be achievable, empathetic understanding and behavioral guidance from clinicians are essential for improving patients' well-being.

How Individuals can Improve their Well- being

- Get at least eight hours of sleep every night
 - Eat foods in moderation and keep a balanced diet
 - seek proper treatment of mental and physical illnesses
 - seek mental health treatment if needed
 - mindfulness
 - Workout for at least 60 minutes three times a day
 - find ways to reduce stress
 - be resilient
- 

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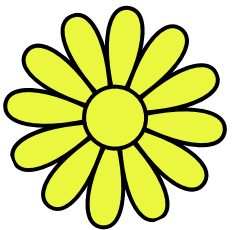
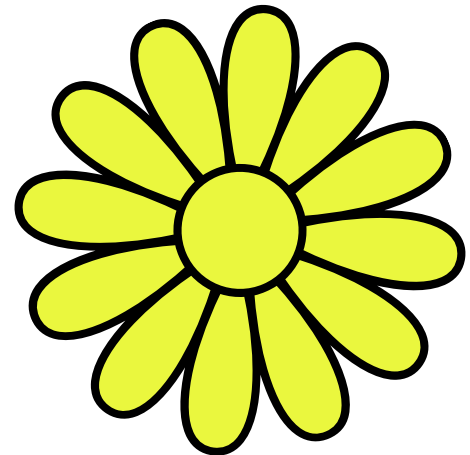
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Thank you!