

Food for Thought

Nutrition and the Aging Brain

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Cognitive Science and Psychology



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Introduction

Perhaps because aging and I are becoming inseparable companions, I am increasingly interested in anything that might slow or even prevent the cognitive decline that often accompanies the aging brain. In a previous book, I analyzed how activities such as systematic exercise, cognitive stimulation, and even affectionate and social activities could lead to cognitive sharpening and psychological resilience. I realized subsequently that the impact of nutrition on delaying cognitive decline was at least as important as those activities. Hence this book.

With cognitive decline in mind, consider that while much of modern nutrition research assesses impacts on lifespan, the newer term “healthspan” describes our years of living with good health. Nutritionists interested in healthspan usually emphasize cardiovascular health, diabetes, cancer, obesity, or similar indicators of physical health. Lifespan and healthspan are not always correlated; indeed, some nutritive interventions that extend the one can limit the other (e.g., Wilson et al., 2021). But the focus of this book is on nutrition’s impacts on the aging brain, on our possibly-declining cognitive abilities, and on our changing emotional dispositions. Perhaps we need a different term for that—one that more accurately describes mental preservation. Just free-associating, perhaps “cogspan” or even “smartspan” could indicate our later years of lucidity. Unfortunately and obviously, neither of those terms has any real pizzazz, so I withdraw them from official consideration. But pizzazz or not, I am fond of “smartspan” and I hope mine is long and steady.

Of course, my concerns with aging and cognition are not unique. As we approach our “best by” date, most of us hope that our life pattern reflects healthy elderly years with all our mental faculties intact, at least until we are overtaken by our genetic limitations. The pattern of a healthy and lucid elderly life followed by death that arrives without dragging her feet is the “squaring of the curve.” Thus the “squaring” is not a gradual decline, but rather a late-but-quick one.

Assessing impacts on brain health from nutrition leads to unique recommendations because nutrition that does not extend life or save us from cardiovascular disasters should not necessarily be dismissed; it may add to the curve squaring of mental health and cognitive capacities. Consider, for example, recent observations that multi-vitamin supplements have not been proven to extend life and may therefore be “a waste of money.” However, as noted extensively below, vitamin supplements may still contribute to brain health, cognitive preservation, and other aspects of mental health, especially for those

of us with some nutritive deficiencies. And as for “wasting money,” even multivitamin formulations for older people like me cost only US \$.10; they are affordable. Actually, the stand taken by many nutritionists against supplements is justified by their recognition that many essential nutrients can only be obtained from food—not from supplements, and they recognize that many of us substitute supplements to allay concerns about poor dietary choices.

Another reason for emphasizing brain health and preserving cognition is that some nutrients may have different impacts on brain health than they do on other aspects of physical health. For example, there is some evidence that moderate doses of alcohol enhance cardiovascular health, but those same moderate levels have sometimes been found to be harmful for brain and/or cognition, or sometimes beneficial (yes!) depending on the important factors discussed in Chapter 14.

Other nutrients like tryptophan that have positive effects on neurochemical balances and thus moods and energy may have no known positive impacts on longevity (Canfield & Bradshaw, 2019).

Consistency. The history of research on nutrition seems filled with inconsistent findings—sometimes outright contradictions. Those of us lucky enough to have progressed to “old” or even all the way to “elderly” have experienced the whip-lash of research informing us that previously good nutrients were actually bad for us, and vice versa. To mention just a few examples, assessments of eggs have gone from bad to good—especially good for brains, whereas some margarine, that used to save us from “awful” butter, has progressed largely from good to bad; trans fats that used to be added to everything delicious are now considered almost deadly, and sugar-filled drinks keep getting worse and worse. Some of the artificial sweeteners that otherwise could “save” us from the sugar have proven to be awful for us. Whole milk may not be so bad after all, and some cheeses are absolutely great for us (perhaps only slightly exaggerated for personal reasons). Long-term coffee consumption has emerged from probably bad to quite good, and thankfully even chocolate turns out to be increasingly wonderful.

Keep in mind that inconsistencies in nutrition research are not unique. Rather than dismissing nutrition research because of its occasional inconsistencies, we should examine the research with caution and the reservations discussed in Chapter 3, and even then perhaps view at least some of the inconsistencies as signs of scientific progress.

Smart supplements. An overarching issue of inconsistent nutrition research is whether *any* diet or supplement has substantial benefits for preserving brain and cognition, and for delaying dementia. It was only in 2015 that the lead journal of the Association for Psychological Science called nutritional

mental health an “emerging” field (Kaplan et al., 2015, p. 964). Yet even well before 2015, research on major dietary approaches such as the Mediterranean diet showed that smart nutrition choices do indeed support brain maintenance and development, enhance cognition, buttress our better moods, and even delay dementia.

But what about specific nutrients, and supplements? In the editor's introduction to a special section on nutrition and mental health in the journal *Clinical Psychological Science*, Kazdin (2016, p. 1080) noted that there are “controlled clinical trials showing that psychiatric symptoms and disorders respond to micronutrient interventions.” However, summaries of the larger body of research on specific nutrients and supplements are mixed. Those inconsistencies often bother people who try to be conscientious about their nutrition, and the sometimes-bogus information from some purveyors of supplements does not help.

According to the US Government Accountability Office report from 2017, many advertisements that describe the benefits of various supplements are simply untrue, and some are even illegal. Specifically focusing on cognition, a *Consumer Reports* article recently asked “Do memory supplements really work?” and answered with quotations from authorities that “dietary supplements cannot cure, mitigate, treat, or prevent Alzheimer's dementia, or any disease” (Calderone, 2018, p. 2).

A major purpose of this book is to address that issue, mostly by examining research published in the last decade or so. But before we go there, reconsider the phrase that “dietary supplements cannot cure, mitigate, treat, or prevent Alzheimer's dementia, or any disease.” I shall show that modern research justifies denying that phrase. As written, it is simply wrong. But beyond questioning its accuracy as written, note also that “*or delay*” was *not* included. Perhaps we should not reject a supplement that has solid research support for *delaying* cognitive decline or *delaying* dementias such as Alzheimer's, or one that delays or *mitigates* depression. After all, a delay could extend a decade or two. Nor should we write off the potential for major benefits to brain, cognition, or mental health from some supplements merely because of occasional bogus and fraudulent claims.

We should remain especially aware of the potential needs for “essential nutrients.” Essential nutrients are nutrients that we require from our food because we humans cannot synthesize them in our bodies in sufficient quantities. There seem to be 40 to 50 of them—around 15 each of vitamins and minerals, some amino acids, and a few essential fatty acids. In ideal conditions, we would be able to derive those nutrients from the foods we consume, but that may not always be the case. Supplements may be required, or at least very beneficial, and those supplements may be important for

maintaining balances of nutrients that are not technically essential. For example, with exposure to sufficient sunlight, our bodies can usually synthesize enough vitamin D, but when winter arrives in Northern lands, we benefit from an occasional salmon, or, failing that, even from a drugstore supplement. Naturally, our concern with important nutrients goes beyond those that are technically called essential.

Expertise. It would be appropriate for readers to question my authority for saying such things. The answer, like nutrition itself, is complicated. Because I am not a nutritionist I recognize that my occasionally questioning real nutritionists must seem a bit audacious. My interests as a psychologist are in how neurochemistry and various neural and brain processes affect our cognitive capacities and our resilience. As mentioned above, my previous book, titled *“Building resistance to stress and aging: The toughness model”* was about how activities such as physical exercise, some social activities, cognitive challenges, etc. enhance neurochemistry and neural structures (i.e., toughen us), and then how those physiological modifications lead to enhanced cognition and to psychological resilience. But for those activities to enhance neurochemistry and neural structures the right nutritive elements must be available in sufficient amounts. And they do make a difference.

To continue being audacious, I believe that a case can be made for a book such as this being produced by a non-nutritionist. Without pre-conceived notions about the effectiveness of any of the nutrients or supplements described within, I have dived into the modern research; and the reference section of well over 300 research papers is heavy with reviews, sometimes with meta-analyses—reviews and analyses mostly by real nutritionists to whom I owe a great debt.

What lies ahead. First, note that this is not designed to be a “self help” book. Rather it is a book about nutrition science, and neuroscience, cognitive science, and to a lesser extent about the science of stress tolerance, depression, and anxiety. Although I make some dietary recommendations that leak into some of the chapters and are summarized in Chapter 20, my primary goal is to provide the scientific information to allow readers to make their own nutrition choices.

In fact, if you need more information to feel confident about your choices, doing further scholarship on your own is really not that difficult. Simply access “Google Scholar” and then enter your own keywords such as “lutein cognition review” and limit the search to (say) papers published after 2010. The article abstracts you obtain from such searches may be readable and all that you really need. However, if you need the entire paper, clicking an icon for “PDF” or something similar may quickly download your paper. If you have

access to an academic library, the Interlibrary Loan office can get the paper for you. If worst comes to it, you can almost always pay for a copy.

The structure of the book is that the first three chapters provide a foundation for understanding impacts on brain, cognition, and resilience. Chapter 1 very lightly sketches relevant brain structure and neurochemistry. Chapter 2 discusses in only slightly more detail how aging and stress affect neurochemistry, brain structure, cognitive capacities, and resilience. Chapter 3 introduces basic nutrition research issues—the good, the bad, and the ugly. The brain scientists among you may wish to skim or even skip the first two or even three of those chapters. Chapters 4 through 17 consolidate the credible modern research on impacts of nutrition on brain and cognitive capacities. Chapter 18 describes nutrition that affects psychological resilience, interpreted there as stress tolerance, and resistance to both anxiety and depression.

Chapter 19 describes how activities that toughen us can interact with nutrition that has similar effects. Although toughening activities include the wide array listed above, Chapter 19 will be limited to the interplay of nutrition with physical exercise and cognitive challenge. After all, I must stop somewhere. Chapter 20 offers afterthoughts and briefly summarizes the highlights of nutrition impacts on brain and cognition.

The Glossary is meant to be an informative and substantial part of the book, designed to relieve any pain I may have inflicted with scanty explanations in the text. Please use it.

Thanks and acknowledgements. My wife Karen has been most patient. Being cooped up together during the pandemic has led to interesting interactions. Often she has come upon me talking to my computer screen, obviously confused, but trying desperately to figure it all out. At such times I have not been the great communicator she may have wished. My thanks for putting up with all of it.

Most sincerely, I thank the thousand or so scholars who prepared the research papers and reviews that I have devoured to obtain a reasonable level of understanding of this most interesting topic.

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