SUMMARY OF DGAC DEPRESSION AND DIET STUDIES

Below I’ve summarized each of the 19 source studies pertaining to depression and diet used by the U.S. Dietary Guidelines Advisory Committee in the development of their Scientific Report as referenced in my post: “New Dietary Guidelines Hazardous to Your Health?” Studies are listed by their reference numbers as they appear in the DGAC report. Complete citations are at the bottom of the page.

175: Meat not evaluated.

182: Negative study about HEI-C adherence and risk for depression (meat not evaluated).

189: Processed foods pattern associated with higher risk for depression than whole foods pattern. Unprocessed red meat and poultry were not included in either of the dietary patterns examined.

190: Higher ratio of red meat to white meat NOT associated with increased risk for depression.

191: Negative study that specifically found no association between high meat/high fish dietary pattern and depression risk.

192: “Healthy” dietary pattern associated with lower risk for depression compared to an unhealthy pattern. The only component of the “unhealthy” diet that was associated with depression risk was refined carbohydrate, specifically not the meat.

193: Negative study (meat lumped together with Western junk foods but still no association).

194: “Prudent diet” better than “Unhealthy diet” (in which meat was lumped together with “chips, crisps, and soft drinks”).

195: Diet highest in animal protein did not increase risk for depression in women (high animal protein diet not tested in men).

196: “Inflammatory Dietary Pattern” (in which red meat was lumped together with sugar-sweetened soft drinks, refined grains, diet soft drinks, margarine, other vegetables, and fish) associated with increased risk for depression.

197: Higher adherence to DQI-I does not reduce risk for depression. Meat not studied (the DQI-I doesn’t include a meat category).

198: Dietary pattern containing red and processed meats not associated with depression risk.

199: Meat/processed meat dietary pattern did not increase risk for depression.

200: “Prudent diet” better than Western diet (which lumps meat in with “sweet snacks like ice-cream, candies and chocolate, sweet soft drinks and juices, baked potatoes and French fries, French rolls, processed foods, high fat cheese and eggs”).

201: Higher adherence to Mediterranean diet associated with reduced risk for depression. Difference in meat consumption between high adherence and low adherence group was only 43 g or 1.3 oz of “meat and meat products” whereas high adherence group ate 194
fewer grams of dairy per day, 373 g more vegetables, 307 more g of fruit, and 64 more g of fish. [Therefore: 66% more legumes, 60% more cereals, 264% more fruit/nuts, 216% more vegetables, 61% less dairy and only 22% less meat.]

202 (an RCT): In healthy subjects, the AHA diet (which includes lean red meats) no different from Mediterranean diet with or without nuts (the Mediterranean diet emphasizes white meats over red meats) with respect to depression risk.

203: Mediterranean diet associated with lower risk for depression (however the Mediterranean diet is not only lower in meat than standard diets but is also lower in refined carbohydrates).

204 (an RCT): “Vitality Diet” (containing 6 servings of lean red meat per week) reduced risk for depression when compared to a “Healthy Diet” (containing 3.5 servings of lean red meat per week).

205: “Healthy diet” without meat reduced risk for depression in pregnant women compared to a “Brazilian diet” (containing an unquantified amount of meat) or a “Processed” diet (containing an unquantified amount of processed meat).

CITATIONS


