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Elderly, Nutrition and Dementia

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Introduction: Does it matter what we eat for our mental health? Diet and nutrition have a significant effects on mood and mental well-being. Increase evidence indicates a strong association between nutrition and mood disorders, including anxiety and depression, as well as other neurologthic conditions. The objective of this review was to evaluate the evidence from human studies on the intake of vitamins, either as monotherapies or in combination with other vitamins, as neuro protective agents that may delay the onset of cognitive decline in older adults.

Methods and Materials: Evidence-based methodologies were used to capture and evaluate the highest levels of evidence.

Results: The current evidence available showed no association for cognitive benefits of vitamins B6 or B12 as a monotherapy and recent systematic reviews provide no clear evidence that supplementation with vitamin B6, B12 and/or folic acid improves dementia outcomes or slows cognitive decline or psychiatric disorders, even though it may normalize homocysteine levels. Meta-analyses from systematic reviews have shown an association between low vitamin D levels and diminished cognitive function, although causality cannot be confirmed from the available evidence. There is no convincing evidence for an association of vitamin A, vitamin or vitamin E either as a monotherapy or incombination with other antioxidant vitamins such as β-carotene and the prevention of cognitive decline.The appraisal of nineteen systematic reviews and meta-analyses has highlighted the heterogeneity between studies and the need for better consensus on definitions of cognitive decline, duration of testing and agreement on which specific endpoints are clinically relevant.

Discussion: Raised total plasma homocysteine is associated with an increased risk of cognitive impairment and dementia, although available evidence from randomized controlled trials shows no obvious cognitive benefit of lowering homocysteine using B vitamins. Protein and Omega supplements are the best of the nutrition treatment for neurorehabilitation in dementia elderly patients.

Conclusions: Evaluation of the totality of the currently available evidence indicates that intake of the above vitamins, either as a monotherapy or in combination with other vitamins, has no clinically-relevant effect on delaying cognitive decline or delaying the onset of dementia or psychiatric disorder in older adults.