Sugar intake from sweet food and beverages, common mental disorder and depression: prospective findings from the Whitehall II study

Researchers predict that mood disorders, such as anxiety and/or depression will become the leading cause of disability in high income countries by 2030. Diet is more and more discussed as a factor associated with the risk of mood disorders. In several populations the intake of added sugars, sweet food and drinks has been found to be associated with mood disorders. Animal research suggests some biological explanations for a link. But the associations could also reflect a reverse phenomenon: low mood could make people change their diet.

Ms. Knüppel and her colleagues wanted to find out if a high intake of sugar from sweet food and drinks predicted new and recurrent mood disorders. And, whether having a mood disorder would make people more inclined to consume sweet foods and drinks. The researchers analysed data from a group of British civil servants. These answered questionnaires about their diet and mental health over the last 30 years.

(1) They found that men without a mood disorder who consumed high amounts of sugar from sweet food/drinks had an increased risk of suffering from a mood disorder five years later, compared with those who ate less. This effect was independent of the men’s socioeconomic and marital status, physical activity, drinking, smoking, other eating habits, body fatness and physical health. (2) They found that men and women with a mood disorder and a high intake of sugar from sweet food and drinks were at higher risk of becoming depressed again five years later, compared with those who consumed less sugar. But this association was partly explained by their overall diet. (3) Finally they found no evidence for a potential reverse effect: participants did not change their sugar intake after suffering from mood disorders.

Further studies are needed to see if the results replicate. If so, policies promoting the reduction of sugar intake could additionally support primary and secondary prevention of depression.

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