Mohsenpour et al. BMC Nutrition

https://doi.org/10.1186/s40795-023-00732-x

(2023) 9:80

# RESEARCH





Milk kefir drink may not reduce depression in patients with non-alcoholic fatty liver disease: secondary outcome analysis of a randomized, single-blinded, controlled clinical trial

Mohammad Ali Mohsenpour<sup>1,2</sup>, Farzaneh Mohammadi<sup>1,2</sup>, Nadia Razmjooei<sup>2</sup>, Mohammad Hassan Eftekhari<sup>2</sup> and Najmeh Hejazi<sup>2\*</sup>

## Abstract

**Background** Depression is prevalent among individuals with non-alcoholic fatty liver disease (NAFLD) and can cause poor health outcomes. Moreover, a solid bilateral association between NAFLD and depression has been shown, which may alleviate by kefir consumption. Thus, we aimed to investigate the effect of milk kefir drinks on the depression status of individuals with NAFLD.

**Methods** In a secondary outcome analysis of a randomized, single-blinded, controlled clinical trial, 80 adults with grades 1 to 3 of NAFLD were included in an 8-week intervention. Participants were randomly assigned to Diet or Diet + kefir groups to either follow a low-calorie diet or a low-calorie diet along with a 500 cc milk kefir drink daily. The participants' demographic, anthropometric, dietary, and physical data were recorded before and after the study. Depression status was assessed using the Persian format of the second version of the Beck Depression Inventory (BDI-IP-Persian) at the baseline and after 8 weeks of intervention.

**Results** Overall, 80 participants aged  $42.87 \pm 10.67$  years were included in the analysis. The data on the baseline demographic, dietary, and physical activity of the groups were not significantly different. During the study, participants in Diet + Kefir group had a significantly decreased energy (P=0.02), carbohydrate (P=0.4), and fat consumption (P=0.4). However, during the study, the depression score was not significantly reduced in the Diet group, the Diet + Kefir group showed a significant reduction in depression (P=0.02). However, between-group analyses for changes in depression were not significant (P=0.59).

Conclusion Consumption of milk kefir drink for 8 weeks may not reduce depression symptoms in adults with NAFLD.
 Trial registration The trial was registered at IRCT.ir as IRCT20170916036204N6 (August 2018).
 Keywords Non-alcoholic fatty liver disease, Depression, Depressive disorder, Milk, Kefir

\*Correspondence: Najmeh Hejazi najmehhejazi@gmail.com



<sup>1</sup>Student Research Committee, Shiraz University of Medical Sciences, Shiraz, Iran
<sup>2</sup>Department of Clinical Nutrition, School of Nutrition and Food Sciences, Shiraz University of Medical Sciences, Shiraz, Iran

© The Author(s) 2023. **Open Access** This article is licensed under a Creative Commons Attribution 4.0 International License, which permits use, sharing, adaptation, distribution and reproduction in any medium or format, as long as you give appropriate credit to the original author(s) and the source, provide a link to the Creative Commons licence, and indicate if changes were made. The images or other third party material in this article are included in the article's Creative Commons licence, unless indicated otherwise in a credit line to the material. If material is not included in the article's Creative Commons licence, unless indicated otherwise in a credit line to the material. If material is not included in the article's Creative Commons licence, unless indicated otherwise in a credit line to the material. If material is not included in the article's Creative Commons licence and your intended use is not permitted by statutory regulation or exceeds the permitted use, you will need to obtain permission directly from the copyright holder. To view a copy of this licence, visit http://creativecommons.org/licenses/by/4.0/. The Creative Commons Public Domain Dedication waiver (http://creativecommons.org/publicdomain/zero/1.0/) applies to the data made available in this article, unless otherwise stated in a credit line to the data.

investigations are suggested with adequate sample size, considering different abnormalities in populations, and assessment of gut microbiota population in participants.

### Conclusion

Milk kefir drink consumption for 8 weeks may not reduce depression symptoms in NAFLD patients. Further randomized controlled clinical trials with longer durations and sufficient sample size are suggested to clarify the possible effect.

#### Abbreviations

ALT	Alanine transaminase
ANCOVA	Analysis of covariance
AST	Aspartate transaminase
BDI-II-Persian	Beck Depression Inventory-II-Persian
BMI	Body mass index
CRP	C-reactive protein
DASH	Dietary Approaches to Stop Hypertension
GABA	Gamma aminobutyricacid
HPA	Hypothalamic-pituitary-adrenal
IFN-γ	Interferon gamma
IL-2	Interleukin 2
IL-6	Interleukin 6
IPAQ	International Physical Activity Questionnaire
IRCT	Iranian Registry of Clinical Trials
IU	International unit
MIND	the Mediterranean-DASH Intervention for Neurodegenerative Delay
NAFLD	Non-alcoholic fatty liver disease
NF-kB	Nuclear factor kappa B
SD	Standard deviation
SUMS	Shiraz University of Medical Sciences
T2DM	Type 2 Diabetes Mellitus
TNF-a	Tumor necrosis factor alpha

#### Acknowledgements

The Authors send warm regards to the participants of the study. The research team would like to thank the staff of Motahari Clinic for their cooperation and the vice-chancellor for research of Shiraz University of Medical Sciences for financial support of the study. The authors would like to thank Shiraz University of Medical Sciences, Shiraz, Iran and also Center for Development of Clinical Research of Nemazee Hospital and Dr. Nasrin Shokrpour for editorial assistance.

#### Authors' contributions

NH, NR, and MAM conceived the study. NR and FM conducted the study. MAM and FM conducted statistical analysis. MAM and MHE provided the first draft. MAM, FM, and NH revised the manuscript. All authors have read and approved the final manuscript.

#### Funding

This study was funded by vice-chancellor for research of the Shiraz University of Medical Sciences (code: 13759). The funding body played no role in the design of the study and collection, analysis, interpretation of data, and in writing the manuscript.

#### Data Availability

The datasets used and/or analyzed during the current study are available from the corresponding author on reasonable request. To access the dataset, please contact Dr. Najmeh Hejazi via email (najmehhejazi@gmail.com).

#### Declarations

#### Ethics approval and consent to participate

The study was done in accordance with the Helsinki Declarations of ethics and approved by the Ethics committee of Shiraz University of Medical Sciences (SUMS), Shiraz, Iran (Code: IR.SUMS.REC.1397.107). Participants were informed about the study prior to participation. Informed consent was obtained from all subjects.

#### **Consent for publication**

Not applicable.

#### Competing interests

The authors declare no competing interests.

Received: 17 January 2023 / Accepted: 19 June 2023 Published online: 29 June 2023

#### References

- Mantovani A, Scorletti E, Mosca A, Alisi A, Byrne CD, Targher G. Complications, morbidity and mortality of nonalcoholic fatty liver disease. Metabolism. 2020;111:154170.
- Clarke DM, Currie KC. Depression, anxiety and their relationship with chronic diseases: a review of the epidemiology, risk and treatment evidence. Med J Aust. 2009;190:54–560.
- Xiao J, Lim LKE, Ng CH, Tan DJH, Lim WH, Ho CS, et al. Is fatty liver associated with depression? A meta-analysis and systematic review on the prevalence, risk factors, and outcomes of depression and non-alcoholic fatty liver disease. Front Med. 2021;8:691696.
- Labenz C, Huber Y, Michel M, Nagel M, Galle PR, Kostev K, et al. Nonalcoholic fatty liver disease increases the risk of anxiety and depression. Hepatol Commun. 2020;4(9):1293–301.
- 5. Mathers CD, Loncar D. Projections of global mortality and burden of disease from 2002 to 2030. PLoS Med. 2006;3(11):e442.
- Lim GY, Tam WW, Lu Y, Ho CS, Zhang MW, Ho RC. Prevalence of depression in the community from 30 countries between 1994 and 2014. Sci Rep. 2018;8(1):1–10.
- Gharraee B, Tajrishi KZ, Sheybani F, Tahmasbi N, Mirzaei M, Farahani H, et al. Prevalence of major depressive disorder in the general population of Iran: a systematic review and meta-analysis. Med J Islamic Repub Iran. 2019;33:151.
- Moussavi S, Chatterji S, Verdes E, Tandon A, Patel V, Ustun B. Depression, chronic diseases, and decrements in health: results from the World health surveys. The Lancet. 2007;370(9590):851–8.
- Gawlik-Kotelnicka O, Strzelecki D. Adiposity in depression or depression in adiposity? The role of immune-inflammatory-microbial overlap. Life. 2021;11(2):117.
- Goldbacher EM, Bromberger J, Matthews KA. Lifetime history of major depression predicts the development of the metabolic syndrome in middleaged women. Psychosom Med. 2009;71(3):266.
- Roriz-Cruz M, Rosset I, Wada T, Sakagami T, Ishine M, Roriz-Filho JS, et al. Stroke-independent association between metabolic syndrome and functional dependence, depression, and low quality of life in elderly communitydwelling brazilian people. J Am Geriatr Soc. 2007;55(3):374–82.
- Luppino FS, Leonore M, de Wit PF, Bouvy T, Stijnen P, Cuijpers, Brenda WJH, Penninx. and Frans G. Zitman. 2010."Overweight, obesity, and Depression: a systematic review and Meta-analysis of Longitudinal Studies.". Arch Gen Psychiatry.67(3):220–29.
- Tomeno W, Kawashima K, Yoneda M, Saito S, Ogawa Y, Honda Y, et al. Nonalcoholic fatty liver disease comorbid with major depressive disorder: the pathological features and poor therapeutic efficacy. J Gastroenterol Hepatol. 2015;30(6):1009–14.
- Sayiner M, Arshad T, Golabi P, Paik J, Farhat F, Younossi ZM. Extrahepatic manifestations and healthcare expenditures of non-alcoholic fatty liver disease in the Medicare population. Hep Intl. 2020;14(4):556–66.
- Birk JL, Kronish IM, Moise N, Falzon L, Yoon S, Davidson KW. Depression and multimorbidity: considering temporal characteristics of the associations between depression and multiple chronic diseases. Health Psychol. 2019;38(9):802.