

# Fuel for recovery

**Achieving physical wellbeing is about more than just dealing with the effects of drugs or alcohol on the body. Good nutrition is a neglected factor that can play an important part in regaining health, as nutritionist Helen Sandwell explains.**

It is now widely appreciated that good nutrition is essential to maintain a healthy body. And this is particularly important for drug and alcohol users, as active drug users and heavy drinkers are often malnourished. Food of any type is often low on the priority list of drug and alcohol users, with little regard given to nutritional content. Up to 50 per cent of heavy drinkers, for example, are estimated to be significantly malnourished.

Many drug and alcohol users have diseases resulting directly or indirectly from their substance use (such as hepatitis, alcohol liver disease and HIV), which make the need for a good diet even more important. Lack of nutritious food or simply insufficient quantities of food, together with the effect of alcohol, drugs and chronic disease reducing the body's ability to absorb and utilise nutrients, can result in conditions such as Wernicke-Korsakoff syndrome, osteoporosis and muscle-wasting. So it is important for their physical wellbeing that service users get good advice about a healthy diet, and that those with particular physical conditions get specialist nutritional support and guidance.

This much we do know. Yet drug and alcohol users have received very little attention from nutrition professionals in the UK. For instance, the professional body for state registered dieticians, the British Dietetic Association, produces

no guidelines for the treatment of drug and alcohol users. In general, very little research has been undertaken in this area. It is no wonder then that nutrition knowledge and application among drug and alcohol professionals is somewhat scant, and what knowledge does exist may well have been gleaned from unreliable sources and those set to make financial gains, such as supplements companies.

Much of the nutrition advice that is given within treatment settings appears to be largely concentrated on those clients perceived to have a concomitant eating disorder. However all clients could benefit from optimising their diets and learning new eating behaviour during the course of their treatment – not only because of the importance of good nutrition to the physical wellbeing of service users, but also because of its potential impact on substance use outcomes.

Good nutrition has been demonstrated to decrease mood and behavioural problems including anger, depression and anxiety, all of which are associated with an increased risk of relapse. It seems likely therefore that developing a healthy diet and eating patterns could help prevent a client from relapsing.

A recent piece of research, for instance, found that in cocaine users, rates of relapse were much lower among those that had higher levels of

omega-6 and omega-3 fatty acids in their bodies. In fact, levels of these fatty acids were better predictors of relapse than past levels of cocaine use. Such results suggest that there may be a causal link between levels of fatty acids in the body and vulnerability to relapse.

### So what constitutes a healthy diet for recovery?

Omega-3 fatty acids, like those found in oily fish, have been demonstrated to be effective in the treatment of a number of mood and behaviour disorders including clinical depression, anxiety states, ADHD and aggressive behaviour – and as noted above, may be significant in determining a person's treatment outcomes. In terms of what to recommend and serve up to clients, the Food Standards Agency now recommends a maximum of four portions of oily fish a week for males and women beyond child-bearing age and a maximum of two portions a week for women of child-bearing age (because of the chance of pregnancy and the possible effects on a developing foetus of environmental toxins present in oily fish). Because some people find oily fish unpalatable, the daily use of fish oil capsules may be the preferable choice for them (although pollutants may still be a factor in some brands).

Other major players in the prevention of negative mood states include folic acid, vitamin B6 and vitamin B12. Folic acid is found in green leafy vegetables such as spinach, spring greens and broccoli, which are better steamed than boiled since folic acid is easily leached out by water. Vitamin B6 is found in fish, meat, milk, eggs, wholegrains, nuts and beans. Vitamin B12 is made by micro-organisms and is found only in animal products including meat and dairy, meaning it is important for vegans to take a supplement or eat fortified cereals containing B12.

Another important factor in controlling mood disorders is blood sugar. Poor blood sugar control and sugar cravings can be common among drug and alcohol users, so slow carbohydrate release diets are of particular importance to them. A diet

high in refined carbohydrate, such as sugar, white bread, white rice, pastry, cakes and biscuits means that carbohydrate is rapidly broken down through digestion to the component simple sugar glucose and quickly absorbed into the bloodstream, where it stimulates the release of large amounts of insulin, whose job it is to remove the glucose from the blood for the production of energy or to be stored as glycogen or fat. So, with such a refined diet, levels of sugar in the blood peaks and dips, with accompanying peaks and dips of energy, mood and alertness. And when blood sugar dips, as it will do so quickly following a highly refined meal, the body produces adrenaline to kick start insulin into releasing the body's energy stores and restore blood sugar balance. Such unidentified adrenaline bursts could be anxiety provoking in the anxiety-prone, or may cause irritability in others.

Another important issue is caffeine. People in recovery often replace drink and drugs with large amounts of caffeine – whether in coffee, or drinks like Coke, Pepsi or Red Bull, which are also high in sugar. As well as interrupting sleep patterns – which itself has a negative impact on psychological health – caffeine can also increase feelings of anxiety and irritability.

Overall, clients should generally be encouraged to eat slow energy release foods such as wholegrain bread, pasta and cereals, brown rice, beans and pulses, to avoid the blood sugar highs and lows. Additionally they need the high concentrations of nutrients found in fruit and vegetables, good sources of protein such as fish, meat and eggs, while leaving out highly refined fatty sugary foods. And of course, they need to keep a lid on their caffeine intake.

Changing clients' eating habits is only possible if they can see why the changes are going to have a positive effect on their lives and they want to, and believe, they can make those changes. The nutrition field is now employing the motivational interviewing techniques first developed in the drug and alcohol field, to bring about eating behaviour change. Although nutrition advice can be given successfully both in a group or one-to-one setting, care must be taken to tailor advice to

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individuals' needs.

An 18-year-old, for instance, may never have learned any cooking skills and the most appropriate help might be in teaching shopping skills and making healthy food choices. Someone with HIV may especially need to learn about food hygiene and how to avoid food-borne infections, which could be particularly challenging if that individual lives in a bed-sit without access to a refrigerator. Hepatitis C is likely to have a higher than normal protein and energy requirement but may find eating three full meals a day difficult because of disease symptoms or side effects of medication. They may need specific guidance on gaining optimum nutrition through several small snacks during the day.

When a group of individuals has such varied and complex nutritional requirements, nutrition professionals should ideally become involved. This is even more important where clients have severe chronic illness or if an eating disorder is identified, when medical, psychology and nutrition professionals should work in unison.

Particular care should be taken with nutrition supplements – which are widely offered in treatment settings, yet can do more harm than good. Iron supplements, for example, can further harm already damaged livers; likewise some herbal supplements.

And of course residential and

structured day care services need to think not only about the advice they give their clients and any supplements they might offer, but also what they feed them. In often providing hearty comfort food which is frequently high in refined carbohydrates and fat but relatively low in nutrients, many services are not providing clients with diets for either a healthy body or a healthy mind.

Nutrition is only one of a number of lifestyle changes that can contribute to helping to improve clients' health and long-term treatment outcomes. For example, exercise is known to increase positive mood as well as being key to immunity, heart health and maintaining bone and muscle mass – all of major importance to people with a history of drug and alcohol misuse. Sunlight is another important factor for boosting vitamin D (involved in bone health) and serotonin levels (since serotonin helps improve mood).

Diet is a very important factor, which has been neglected for too long. Hopefully the time has come for treatment providers to consider enlisting the expertise of nutrition professionals to provide training to staff and clients and help influence positive outcomes in treatment programmes through dietary change.

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