### The Silent Pandemic

Supporting Patients Through a Mental Health Crisis

### The Endocannabinoid System: An Essential Player in the Regulation of Mood

A significant 46% of Australians will experience a mental health disorder during their lifetime.<sup>1</sup> Unfortunately, symptoms of anxiety and depression have doubled in Australia since the start of the Coronavirus disease 2019 (COVID-19) pandemic,<sup>2</sup> and in New Zealand more than 50% of those surveyed during the first 10 weeks of the pandemic reported feeling anxious or depressed.<sup>3</sup> One thing is certain: supporting a healthy stress response is now more important than ever. The endocannabinoid system (ECS), a regulatory network involved in homeostatic roles including modulating sleep, mood, memory, appetite and digestion, pain, cardiovascular, immune and inflammatory functions,<sup>4,5</sup> has recently been implicated in the aetiology of anxiety and depression. Before exploring the role of the ECS in stress and mood, it is important to first understand its components, including its receptors, ligands and synthesising and degrading enzymes.

#### Welcome to the Endocannabinoidome

Cannabinoid receptor type 1 (CB1) is the most abundant G protein-coupled receptor in the brain,<sup>6,7</sup> with particularly dense populations in limbic brain regions involved in stress and anxiety, including the hippocampus, prefrontal cortex, amygdala and various hypothalamic nuclei (Figure 1).<sup>8,9</sup> CB1 receptors are highly expressed on gamma-aminobutyric acid (GABA) interneurons, with lower levels on glutamatergic, cholinergic, dopaminergic, serotonergic and noradrenergic neurons.<sup>10,11,12</sup> As such, CB1 is involved in the balance between GABAergic and glutamatergic signalling.<sup>13</sup> Unlike traditional neurotransmission, the ECS functions in a retrograde mechanism, whereby endocannabinoids (eCBs) are released by the postsynaptic dendrite and travel back to the axon terminal of the presynaptic neuron.<sup>14</sup> Once eCBs bind to the cannabinoid receptor on the presynaptic neuron, subsequent neurotransmitter release (e.g., glutamate) is inhibited (Figure 2).<sup>15</sup> Research indicates that CB1 activation at low levels generally produces anxiolytic effects, while high level CB1 activation or blockage of the receptor causes anxiety<sup>16</sup> and depression.<sup>17</sup> For this reason, CB1 is the ECS receptor most frequently implicated in mood disorders. Conversely, cannabinoid receptor type 2 (CB2) is mainly located peripherally in the immune system, as well as in several brain regions with dopamine-related function.<sup>18</sup>

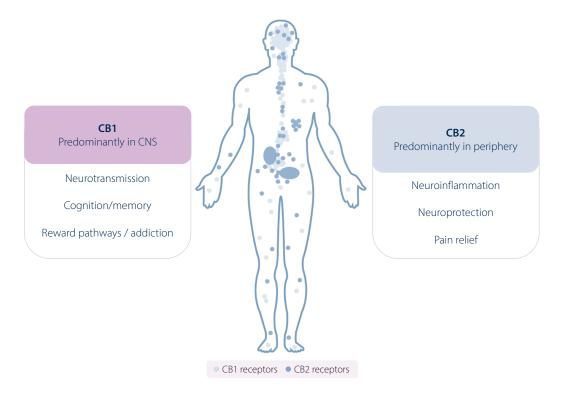
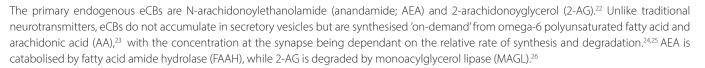


Figure 1. Location and Function of Cannabinoid Receptor Type 1 (CB1) and 2 (CB2) in the Central Nervous System (CNS) and Periphery.<sup>19,20,21</sup>

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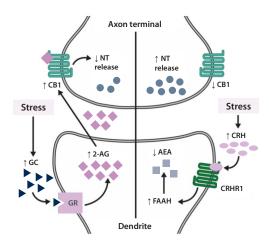


Some eCBs are also active at receptors beyond CB1 and CB2, such as transient receptor potential vanilloid subtype 1 (TRPV1) and peroxisome proliferator activating receptor- $\alpha$  (PPAR- $\alpha$ ).<sup>27</sup> In addition, eCB-like mediators such as palmitoylethanolamide (PEA) and oleoylethanolamide (OEA) share metabolic pathways with eCBs<sup>28</sup> and activate PPAR- $\alpha$  rather than CB receptors.<sup>29,30</sup> PPAR- $\alpha$  activation tends to have an anti-inflammatory effect<sup>31</sup> and the receptor is emerging as a promising target for mood disorders.<sup>32</sup>

These discoveries have led to an expansion of the ECS to the 'endocannabinoidome', encompassing eCB-like mediators and the diverse receptors they effect.<sup>33</sup>

#### The Endocannabinoid System Modulates the Stress Response

The ECS regulates the effects of stress and is tightly linked with the hypothalamic-pituitary adrenal (HPA) axis for this purpose. Corticotropinreleasing hormone (CRH) increases FAAH activity, leading to reduced AEA levels via enzymatic breakdown.<sup>34,35</sup> Studies have demonstrated that this decline in AEA appears to contribute to the manifestation of the stress response, including increases in anxiety.<sup>36</sup> Meanwhile, HPA axis activation and the resultant glucocorticoid release increases synaptic 2-AG,<sup>37</sup> which leads to modulation and termination of the stress response (Figure 2).<sup>38</sup>



#### Figure 2. The Interplay Between Stress and the Endocannabinoid System.<sup>39</sup>

GC: Glucocorticoid; GR: Glucocorticoid receptor; 2-AG: 2-arachidonoylglycerol, CB1: Cannabinoid receptor type 1; NT: Neurotransmitter; CRH: Corticotropin-releasing hormone; CRHR1: Corticotropin releasing hormone receptor 1; FAAH: Fatty acid amide hydrolase; AEA: N-arachidonoylethanolamide.

Unfortunately, chronic stress can lead to downregulation of CB1 receptors<sup>40,41</sup> and blunted eCB signalling,<sup>42</sup> contributing to dysregulation of the ECS which in turn promotes poor stress adaptation and an excessive stress response.<sup>43</sup>

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#### Endocannabinoid Dysfunction is Implicated in Poor Mental Health

A growing body of evidence suggests dysregulation of the ECS is involved in several mental health conditions. For example, significantly reduced serum levels of AEA and/or 2-AG have been reported in females with untreated clinical depression<sup>44,45,46</sup> and individuals with post-traumatic stress disorder (PTSD).<sup>47</sup> Moreover, a strong negative correlation between hair analysis PEA and OEA levels, and PTSD symptoms has been uncovered,<sup>48</sup> suggesting these eCB-like mediators have a role to play in mental health.

Chronic stress caused by social isolation appears to derange both the ECS and HPA axis. A small space flight simulation study in six healthy males found significantly reduced serum 2-AG following 520 days of isolation, while adrenaline, noradrenaline and cortisol levels were all elevated.<sup>49</sup> Given the number of COVID-19 related lockdowns and resultant social isolation experienced by many in Australia and New Zealand, this finding points to the need to reduce allostatic load and support recovery in those presenting with symptoms of chronic stress such as low mood or anxiety.

#### Tonifying the Endocannabinoid System

Endocannabinoid tone reflects the relative levels of eCBs as well as the abundance of CB receptors.<sup>50</sup> Pioneer in cannabis science, Dr Ethan Russo suggests dysfunction in digestion (e.g., irritable bowel syndrome), sleep, mood and pain sensitivity (e.g., migraine, fibromyalgia) can all be indicative of reduced ECS tone.<sup>51</sup> As such, he coined the term 'clinical endocannabinoid deficiency' to describe the contribution of poor endocannabinoid tone to these symptoms. In contrast, increasing eCB levels by enhancing their synthesis or inhibiting their degradation can augment ECS tone and relieve symptoms (Box 1).<sup>52,53</sup>

Is it also possible to have too many eCBs? Indeed, the ECS may be upregulated in obesity and neurodegenerative, inflammatory, metabolic and cardiovascular diseases.<sup>54,55</sup> However, consensus on the interpretation of this finding has not been reached, with some suggesting that this reflects an autoprotective change to the ECS<sup>56</sup> or excess AA consumption, typical of a western diet (as AA is a precursor to eCBs).<sup>57</sup> For an exploration of the impact of poor metabolic health on mood disorders, please refer to accompanying documents *Brain Insulin Resistance: A Forgotten Play in the Silent Pandemic* and *The Interplay of Mitochondria and Insulin in Mood*.

What does this mean in terms of therapeutic intervention? Since the concentration of eCBs, AEA and/or 2-AG, may vary depending on the condition (e.g. cardiovascular disease versus depression),<sup>58</sup> the treatment aim should not be on increasing or decreasing eCB levels, but rather on supporting the *regulation* of the ECS to assist a return to homeostasis.

#### How FAAH Would you go to Support Mental Health?

Given evidence indicates ECS dysregulation in depression and anxiety, researchers have turned to ECS modulation in a bid to support mental health. FAAH, the enzyme involved in the degradation of AEA, PEA and OEA, has been linked with anxiety,<sup>59</sup> while pharmacologic FAAH inhibitors have been found to provide significant anxiolytic effects to individuals with social anxiety disorder<sup>60</sup> and protect against stress-induced negative affect in healthy adults.<sup>61</sup> As such, natural FAAH inhibitors are being investigated to support anxious and depressed individuals. *Lavandula angustifolia* (lavender) oil<sup>62</sup> and compounds such as genistein and daidzein (from soy),<sup>63</sup> and the flavonoid kaempferol (abundantly found in broccoli, apples and strawberries)<sup>64</sup> have been shown to inhibit FAAH to varying degrees. More compounds that impact this important enzyme are sure to be discovered in the future.

#### Relieve: Herbal Medicines to Reduce Symptoms and Regulate Endocannabinoid Tone

As chronic stress dysregulates the ECS, holistic care with an emphasis on restoring an appropriate stress response and rebuilding resilience will naturally support the ECS and improve mental wellbeing. Various therapeutics that are used to relieve symptoms of anxiety and low mood, also support ECS regulation (Table 1). For example, honokiol, a constituent of *Magnolia officinalis* (magnolia) is a CB1 agonist.<sup>65</sup> Animal research indicates that magnolia's anxiolytic and neuroprotective effects are at least partly mediated by this CB1 modulation.<sup>66</sup> When combined with GABAergic herbs such as *Passiflora incarnata* (passionflower)<sup>67</sup> and *Ziziphus jujuba var. spinosa* (zizyphus),<sup>68</sup> *Herbal Support for Hyper HPA and Stress* can help to relieve anxiety caused by excess stress.

For those suffering low mood in addition to anxiety, consider *Lavender Oil and Theanine for Anxiety, Panic and Low Mood*. Emerging research indicates constituents of plants with volatile oils, such as the sesquiterpene  $\beta$ -caryophyllene in *Lavandula angustifolia* (lavender) and *Melissa officinalis* (lemon balm) may exert some of their action via the ECS.<sup>69</sup> Specifically, preclinical studies demonstrate that lavender oil is a FAAH inhibitor,<sup>70</sup> suggesting this herb has the potential to reduce anxiety via improving ECS tone. Indeed, numerous human clinical trials confirm the anxiolytic and antidepressant effects of both lavender oil<sup>71,72,73</sup> and lemon balm.<sup>74,75</sup> Meanwhile, L-theanine, an amino acid isolated from green tea, has been associated with increased brain-derived neurotrophic factor (BDNF) and improved anxiety and depressive symptoms in several studies.<sup>76,77,78,79</sup>

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Neuroinflammation (often associated with reduced BDNF levels) is implicated in the pathogenesis of both anxiety and depression,<sup>80</sup> as is explored in accompanying document, *When Silent Inflammation Becomes Loud*. In fact, there is a complex bidirectional relationship between the ECS and immune system, likely mediated by microglia which express both CB1 and CB2 receptors.<sup>81,82,83</sup> CB2 activation in microglia appears to have anti-inflammatory effects,<sup>84</sup> and the CB2 agonist  $\beta$ -caryophyllene (a constituent in herbs such as lavender and lemon balm) has been found to reduce anxiety and depressive-like behaviours in an animal study.<sup>85</sup>

Consideration	Therapeutic	ECS Function	Additional Actions
Lavender Oil and Theanine for Anxiety, Panic and Low Mood	<i>Melissa officinalis</i> (lemon balm)	Lemon balm contains terpenes that may have ECS regulating action. <sup>86,87</sup>	Lemon balm inhibits GABA- transaminase (which breaks down GABA) <sup>88</sup> and has been found to have anxiolytic and antidepressant effects in clinical trials. <sup>89,90,91</sup>
	<i>Lavandula angustifolia</i> (lavender)	Lavender oil is a FAAH inhibitor, <sup>92</sup> and contains terpenes that may have ECS regulating action. <sup>93,94</sup>	Human trials confirm the anxiolytic effects of lavender oil. <sup>95,96</sup>
	L-theanine	L-theanine may have ECS action (preclinical research, in combination with lemon balm and magnolia). <sup>97</sup>	L-theanine reduces glutamate transmission <sup>98</sup> and has been found to increase BDNF and improve anxiety and depressive symptoms in several studies. <sup>99,100,101,102,103</sup>

#### Table 1. Therapeutics to Support the ECS and Relieve Symptoms.

Chronic pain is a major risk factor for mood disorders.<sup>104</sup> ECS regulating therapeutics including cannabidiol (CBD; a phytocannabinoid derived from *Cannabis sativa*) and the eCB-like mediator PEA may have benefits for mental health. CBD is a CB1/CB2 and TRPV1 agonist, with preclinical research suggesting anxiolytic, antidepressant, anti-inflammatory, neuroprotective and analgesic action.<sup>105,106</sup> However, despite its growing popularity, two recent systematic reviews conclude that CBD currently has insufficient evidence to support its use in mood disorders.<sup>107,108</sup>

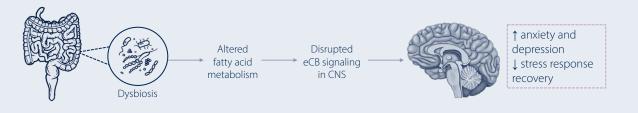
PEA boasts a plethora of preclinical studies indicating anti-inflammatory, neuroprotective and analgesic effects.<sup>109,110</sup> Moreover, a human clinical trial found that 1,200 mg/d PEA was associated with significantly greater improvement in depressive symptoms when added to selective serotonin reuptake inhibitor (SSRI) treatment in 54 patients with major depression.<sup>111</sup> The mechanisms underlying PEA's purported antidepressant effects are still being elucidated, with researchers speculating that they may be modulated by PEA's anti-inflammatory action via TRPV1<sup>112</sup> or PPAR-a binding,<sup>113</sup> or its ability to enhance BDNF production.<sup>114</sup> Despite these promising findings, further clinical trials are needed before recommending either PEA or CBD as a standalone treatment for anxiety or depression.

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#### **Dysbiosis Alters Endocannabinoid Signalling**

A fascinating animal study recently shed light on the cross talk between the ECS and the gut microbiome (Figure 3).<sup>115</sup> In a mouse model of depression, a faecal microbiota transfer (FMT) to healthy mice transmitted both depressive symptoms and reduced neurogenesis. Depression was associated with dysbiosis (decreased *Lactobacilli* abundance and increased *Ruminococcaceae* and *Porphyromonodaceae* species), which altered fatty acid metabolism culminating in reduced levels of 2-AG. Interestingly, supplementing AA (the precursor to eCB synthesis) or blocking the MAGL enzyme (which degrades 2-AG) successfully alleviated the FMT-induced depressive symptoms and improved neurogenesis. Moreover, simply supplementing a strain of the probiotic *Lactobacillus plantarum* reversed depressive behaviour and significantly increased hippocampal 2-AG and AEA concentrations. *L. plantarum* additionally improved neurogenesis, suggesting that supporting microbiome health and correcting dysbiosis may be an essential component to regulating the ECS and supporting mood.



#### Figure 3. Intestinal Dysbiosis Dysregulates Endocannabinoid (eCB) Signalling in the Central Nervous System (CNS).<sup>116</sup>

To learn more about the influence of the microbiota-gut-brain axis, and which therapies support this axis and promote mental wellbeing, tune into the **Microbiota-Gut-Brain Axis** webinar, available on demand at Metagenics Institute<sup>\*</sup>.

#### Restore and Rebuild: Holistic Care Supports Stress Resilience and the ECS

As aforementioned, restoring the stress response will naturally support the ECS and improve wellbeing. In addition to therapeutics, lifestyle factors such as a healthy diet and regular exercise can help rebuild resilience and support the ECS (Table 2, Figure 4). For example, yoga has been found to decrease subjective stress, anxiety and depression in several clinical trials.<sup>117,118</sup> A recent study found that a four-day yoga retreat was associated with significant increases in serum AEA and 2-AG, implicating the ECS in the underlying mechanism of yoga's stress-relieving action.<sup>119</sup> Similarly, most Practitioners will include physical activity in their holistic prescription to support patients' mental health but may be unaware that the ECS may be at least partially responsible for exercises' beneficial effects on mood. In fact, Raichlen and colleagues suggest that the well-known 'runner's high' may be related to eCB release during exercise.<sup>120</sup> Moderate intensity exercise increases levels of AEA and improves mood symptoms in both healthy individuals<sup>121</sup> and those with clinical depression<sup>122</sup> and PTSD.<sup>123</sup> Circulating concentrations of BDNF are also elevated following exercise, which may contribute (independently or in conjunction with eCBs) to the neuroplastic and antidepressant effects of movement.<sup>124</sup>

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#### Table 2. Diet and Lifestyle to Restore an Appropriate Stress Response, Rebuild Resilience and Support the ECS.

Holistic recommendation	Rationale	
Moderate intensity exercise	Moderate intensity exercise increases circulating eCBs, particularly AEA <sup>125,126</sup> and has a beneficial effect on mood. <sup>127</sup>	
Mediterranean diet; sufficient fat intake	AEA and 2-AG are synthesized from omega-6 polyunsaturated fatty acid and AA.a <sup>128</sup> Studies indicate some eCBs derived from dietary omega-3 have anti-inflammatory effects. <sup>129,130</sup> The Mediterranean diet is well established in supporting optimal mood <sup>131</sup> and recent research suggests part of its mechanism may be modulated by the ECS. <sup>132</sup>	
Lavender, lemon balm and other herbs and spices containing β-caryophyllene (e.g., oregano, cinnamon, basil, coriander, sage, hemp, cloves, rosemary, black pepper)	$\beta$ -caryophyllene binds to CB2 receptors^{133} and preclinical research suggests $\beta$ -caryophyllene reduces neuroinflammation,^{134} and anxiety and depressive-like behaviours rodents.^{135}	
Prebiotics and probiotics	Dysbiosis (specifically a reduction in <i>Lactobacilli</i> ) alters fatty acid metabolism and eCB synthesis and signalling, while probiotics have been found to increase eCB production and reduce depressive symptoms in animal studies. <sup>136</sup> <i>Lactobacillus plantarum 299v</i> has been shown to enhance <i>Lactobacilli</i> concentration and reduce salivary cortisol in response to stress, <sup>137</sup> indicating <i>Lpc-37™ and 299v</i> <i>for Gut-Brain Axis Support, Emotional Wellbeing and Stress Response</i> .	
Dark chocolate and cacao	Cacao contains molecular elements which are similar to eCBs. <sup>138</sup> Cross-sectional research indicates dark chocolate consumption may be associated with lower risk of depression. <sup>139</sup>	
Avoid excess alcohol	While CB1 is involved in the reinforcing properties of alcohol, preclinical studies indicate heavy/chronic alcohol consumption dysregulates the ECS, altering eCB levels and CB1 expression. <sup>140</sup>	
Stress management	As chronic stress dysregulates the ECS <sup>141,142</sup> stress management techniques are essential. A four-day yoga retreat was associated with significant reduction in depression and anxiety and increased AEA, 2- AG and BDNF, implicating the ECS in the underlying mechanism of yoga for mental wellbeing. <sup>143</sup>	

The Mediterranean diet (MD) is well established in supporting optimal mental wellbeing<sup>144</sup> and recent research suggests part of its benefit may also be modulated by the ECS.<sup>145</sup> The high polyunsaturated fat content of the MD may support balanced eCB production, as AEA and 2-AG are synthesized from omega-6 polyunsaturated fatty acid and AA,<sup>146</sup> while eCBs derived from dietary omega-3 have anti-inflammatory effects.<sup>147,148</sup> Moreover, PEA is naturally found in several foods that may be part of the MD, including soy bean, peanut, black eyed bean and corn.<sup>149</sup> The MD additionally modulates the gut microbiome towards a less inflammatory composition.<sup>150</sup> Dysbiosis (specifically a reduction in *Lactobacilli*) alters fatty acid metabolism and eCB synthesis and signalling, while probiotics have been found to both enhance eCB production and reduce depressive symptoms (Box 2).<sup>151</sup> *Lactobacillus plantarum 299v* has been shown to enhance *Lactobacilli* concentration and reduce salivary cortisol in response to stress.<sup>152</sup> Therefore, Practitioners can consider *Lpc-37™ and 299v* for *Gut-Brain Axis Support, Emotional Wellbeing and Stress Response*.

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#### Figure 4. Holistic Care Regulates Endocannabinoid Tone and Function.<sup>153,154,155,156,157,158,159,160</sup>

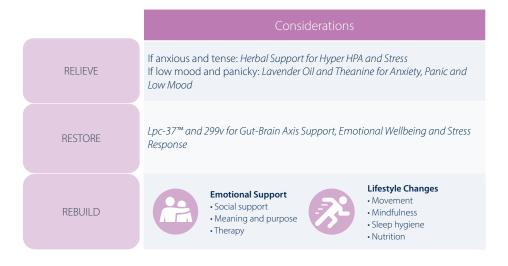
ECS: Endocannabinoid system; eCB: Endocannabinoid; CB1: Cannabinoid receptor type 1; CB2: Cannabinoid receptor type 2; FAAH: Fatty acid amide hydrolase.

#### Nurturing the Endocannabinoid System Supports Mood

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The endocannabinoid system is essential for regulating stress and mood. A growing body of research implicates the ECS in symptoms associated with chronic stress, depression and anxiety. Although the evidence is not yet equivocal, it is certain that holistic care to relieve, restore and rebuild a healthy stress response (Table 3) assists with ECS regulation and will support patients living with poor mental health and the ongoing stress of the COVID-19 pandemic. Future studies will continue to refine our understanding of the part played by the ECS – an essential player in the regulation of mood.



#### Table 3: Considerations to Support Patients with Stress, Anxiety and ECS Dysregulation.

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