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# Inflammatory Pathways: A Review of the Complex Interaction between Infection, Chronic Diseases and Psychiatric Disorders

# Taiwo S Agidigbi <sup>a\*</sup>, Grace P Adeniyi <sup>b</sup>, Bolanle A Adeniyi <sup>c</sup>, Oluyinka E Majekodunmi <sup>b</sup> and Gail B Mahady <sup>d</sup>

<sup>a</sup> Department of Orthopedics and Rehabilitation, Yale School of Medicine, New Haven, CT, USA.
 <sup>b</sup> Federal Neuropsychiatry Hospital Aro, Abeokuta, Ogun State, Nigeria.
 <sup>c</sup> Department of Pharmaceutical Microbiology, University of Ibadan, Nigeria.
 <sup>d</sup> Department of Pharmacy Practice, University of Illinois, Chicago, IL, USA.

#### Authors' contributions

This work was carried out in collaboration among all authors. Authors TSA, GPA and BAA designed the study, drafted the outlines, and wrote the first draft of the manuscript. Authors TSA, GPA, BAA, OEM and GBM managed the literature search. All authors read and approved the final manuscript.

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#### ABSTRACT

Inflammation plays a pivotal role in both acute and chronic diseases, acting as a central mediator between infection and various non-communicable diseases. Recent research has highlighted the intricate interplay between inflammatory pathways, chronic conditions such as cardiovascular disease, diabetes, neurodegenerative disorders, and psychiatric conditions like depression and

\*Corresponding author: E-mail: samuelgeneration015@gmail.com, taiwo.agidigbi@yale.edu;

*Cite as:* Agidigbi, Taiwo S, Grace P Adeniyi, Bolanle A Adeniyi, Oluyinka E Majekodunmi, and Gail B Mahady. 2025. "Inflammatory Pathways: A Review of the Complex Interaction Between Infection, Chronic Diseases and Psychiatric Disorders". Asian Journal of Research and Reports in Neurology 8 (1):27-51. https://doi.org/10.9734/ajorrin/2025/v8i1122. anxiety. This review explores the molecular mechanisms by which inflammation influences these complex interactions, emphasizing the role of cytokines, immune responses, and cellular stress. We critically analyze current literature on how infections, including viral and bacterial pathogens, can trigger or exacerbate systemic inflammation, contributing to the progression of chronic illnesses and psychiatric disorders. Additionally, we investigate how chronic diseases, and psychiatric conditions may reciprocally affect immune regulation, fostering a vicious cycle of inflammation. Understanding these relationships provides insights into novel therapeutic targets such as application of probiotics and natural products aimed at modulating inflammatory responses to improve outcomes in both physical and mental health.

Keywords: Inflammatory-pathways; infection; chronic-disease; psychotic-disorders.

## ABBREVIATIONS

AIDS ACTH AVP BBB BSI CKD COPD COVID-19 CRH DNA EPA EGCG GABA HAND HIV HPA IBD IFN IL-1 IL-1β IL-2 IL-17 IL-23 NK NAC NF-Kb PSTD ROS RNS Treg RA SLE Th1 Th17 TGF-β	<ul> <li>Interleukin-23</li> <li>Natural killer cells</li> <li>N-Acetylcysteine</li> <li>Nuclear factor kappa-light-chain-enhancer of Activated B Cells</li> <li>Post-traumatic Stress Disorder</li> <li>Reactive oxygen Species</li> <li>Reactive Nitrogen Species</li> <li>Regulatory T</li> <li>Rheumatoid Arthritis</li> <li>Systemic Lupus Erythematosus</li> <li>T helper type 1</li> <li>T helper type 17</li> <li>Transforming Growth Factor-beta</li> </ul>
Th1	: T helper type 1
TNF-α T1D	: Tumor Necrosis Factor-alpha : Type 1 Diabetes
UTIs 5-HT	: Urinary Tract INFECTIONS : 5-hydroxytryptamine

### **1. INTRODUCTION**

Inflammation is a vital component of the body's immune response, plaving a critical role in the defense against infections and injuries (Chen et al., 2018; Yeung et al., 2018). However, chronic inflammation has been increasingly implicated in a wide range of diseases beyond infections, including autoimmune conditions, cardiovascular disorders, and neurodegenerative diseases (Chen et al., 2018; Wang et al., 2020; Yeung et al., 2018). Recent research has also highlighted the complex interplay between inflammatory pathways and psychiatric conditions such as depression, anxiety, and schizophrenia (Miller & Raison, 2016). Studies have found that individuals with chronic inflammation, chronic infection are at a higher risk of developing depression (Chen et al., 2018; Miller & Raison, 2016; Wang et al., 2020; Yeung et al., 2018). These findings suggest that inflammation may serve as a common mechanistic link between infections, chronic diseases, and mental health disorders (Chen et al., 2018; Miller & Raison, 2016; Wang et al., 2020; Yeung et al., 2018). This review seeks to explore the multifaceted role of inflammation in the onset and progression of these conditions and underscores the necessity for integrated therapeutic approaches the multifaceted address impact to of inflammation across diverse medical disciplines.

Aims: By examining the pathways that connect infectious agents, chronic illnesses, and psychiatric disorders, we aim to provide a comprehensive understanding of how inflammation acts as a biological bridge between these seemingly disparate areas of health. The review also discusses emerging therapeutic strategies that target inflammation, highlighting their potential to transform the treatment landscape for both physical and mental health conditions. Understanding these inflammatory pathways is crucial, as it offers the opportunity to develop more holistic approaches to treating patients who suffer from a combination of physical and mental health conditions. In light of the growing global burden of chronic diseases and psychiatric disorders, a deeper insight into inflammation's role could lead to significant advancements in healthcare, improving outcomes across various domains of medicine.

#### **1.1 Major Inflammatory cytokines**

The immune system's response to infections often triggers inflammation (Chen et al., 2018; Miller & Raison, 2016; Wang et al., 2020; Yeung

et al., 2018). Inflammatory cytokines play a significant role not only in acute infections but also in the development and progression of chronic diseases (Chen et al., 2018; Miller & Raison, 2016; Wang et al., 2020; Yeung et al., 2018). In many chronic conditions, the immune system is dysregulated, leading to persistent inflammation that damages tissue and contributes to disease pathology. Some major key inflammatory cytokines involved in various chronic diseases, infection and neurological disorders are discussed in this review.

Interleukin-1 (IL-1) is a potent pro-inflammatory cytokine that enhances/boost the immune system (Henderson & Goldbach-Mansky, 2010), stimulate the production of other inflammatory cytokines, and induces fever (Henderson & 2010). IL-1 Goldbach-Mansky, plavs an important role in joint degeneration and inflammation by stimulating osteoclast activity, which breaks down bone (Kim et al., 2009; Murakami et al., 2020; Ruscitti et al., 2018). IL-1 promotes chronic arterial inflammation, which contributes to the formation of plaques in arteries, leading to heart disease such as atherosclerosis (Abbate et al., 2020; Herder et al., 2015; Ridker & Rane, 2021). Chronic lowgrade inflammation driven by IL-1 has been linked to insulin resistance and pancreatic betacell malfunction in type 2 diabetes (Herder et al., 2015; Ruscitti et al., 2018). IL-1 is produced by macrophages, neutrophils, and other immune cells. It increases the expression of adhesion molecules, which allows immune cells to migrate to sites of infection (Declercg et al., 2022; Ralph et al., 2021). It also induces fever by stimulating the hypothalamus. IL-1 is crucial for initiating acute inflammatory reaction and it plays an important role in bacterial and viral infections (Declercq et al., 2022; Ralph et al., 2021). Interleukin-1 Beta (IL-1 $\beta$ ) is a key mediator of the inflammatory response, including fever and the synthesis of acute-phase proteins. Elevated IL-1β has been associated to both acute and chronic stages of schizophrenia (Shibuya et al., 2014; Williams et al., 2022; Zhao et al., 2023). IL-1β play a significant role in neuroinflammation (Elenkov et al., 2000; Williams et al., 2022), and alter neurotransmitter systems dopamine implicated in psychosis (Elenkov et al., 2000; Williams et al., 2022).

**Interleukin-2 (IL-2)**: The cytokine interleukin-2 (IL-2) is essentially for the proliferation and survival of  $T_{reg}$  in the peripheral lymphatic tissues and hence plays an important role in their

Most autoimmune and rheumatic biology. diseases (Grasshoff et al., 2021) demonstrate changes in Treg biology either numerically or functionally, resulting in an imbalance between protective and pathogenic immune cells such as type 1 diabetes (T1D) and systemic lupus erythematosus (SLE) (Mizui, 2019). In several autoimmune diseases, a relative deficiency of IL-2 develops during disease pathogenesis causing a disruption of T<sub>reg</sub> homeostasis, which further accelerates the vicious cycle of tolerance breach and chronic inflammation (Grasshoff et al., 2021; Moorman et al., 2021). Tumor necrosis factor (TNF) and IL-2 have been employed as a measurable immunological parameter in vaccine studies, representing vaccine activity and potentially predictina protection against Mycobacterium tuberculosis (Bhatt et al., 2015). The recent identification and characterization of a small population of regulatory T (T<sub>Reg</sub>) cells resident in the brain presents one such potential therapeutic target (Yshii et al., 2022). IL-2 dysregulation has been reported in psychotic patients (Williams et al., 2022), with studies showing both elevated and decreased levels in schizophrenia (Huang et al., 2022; Williams et al., 2022). This variability may be related to illness stage or individual differences in immune function.

Interleukin-6 (IL-6): has both pro-inflammatory and anti-inflammatory roles, depending on the context. induces acute-phase protein lt production and plays a role in T cell activation. IL-6 is a key player in joint inflammation and bone destruction in RA (Diaz-Gonzalez & Hernandez-Hernandez, 2023; Pandolfi et al., 2020). Elevated IL-6 levels are linked to chronic inflammation in blood vessels and the development of cardiovascular diseases (Abbate et al., 2020; Ridker & Rane, 2021). IL-6 contributes to insulin resistance in diabetes and obesity and is linked to chronic inflammation (Rose-John, 2021) in adipose tissue (Akbari & exacerbates Hassan-Zadeh, 2018), which metabolic disorders (Akbari & Hassan-Zadeh, 2018; Qu et al., 2014). IL-6 promotes tumor growth and survival in various cancers (Orange et al., 2023; Weber et al., 2021), including breast and prostate cancers and can serve as a negative prognostic marker in cancer, this cytokine is also involved in T cell activation (Orange et al., 2023; Rose-John, 2021; Weber et al., 2021). In the diagnosis of bloodstream infection (BSI), various inflammatory markers including IL-6, has been extensively established and can be used as a biomarker for diagnosis of

infection (Yang et al., 2023). There was significantly upregulated IL-6 and IL-10 expression in the gram negative bacterial (Zhu et al., 2022). Interleukin-6 (IL-6) is a proinflammatory cytokine involved in the acutephase immune response. Elevated levels of IL-6 have been consistently reported in the blood of individuals with schizophrenia (Al-Musawi et al., 2022; Patlola et al., 2023) and first-episode psychosis (Williams et al., 2022). High IL-6 is associated with cognitive deficits and may correlate with the severity of symptoms, such as hallucinations and delusions (Al-Musawi et al., 2022; Patlola et al., 2023).

Interleukin-10 (IL-10) is an anti-inflammatory cvtokine/multifunctional cytokine with diverse effects on most hemopoietic cell types that limits immune responses and prevents excessive tissue damage by dampening the production of pro-inflammatory cytokines (Moore et al., 2001; Wang et al., 2019). While IL-10 limits excessive inflammation, members of the interleukin (IL)-10 family of cytokines play important roles in regulating immune responses during host defense but also in autoimmune disorders, inflammatory diseases, lupus (where the body's immune system attacks its own tissues) and cancer (Biswas et al., 2022; Mannino et al., 2015; Moore et al., 2001; Wang et al., 2019). IL-10 is an anti-inflammatory cytokine that regulates and dampens the immune response to prevent excessive inflammation and tissue damage. While IL-10 limits damage caused by inflammation, it can sometimes suppress the immune response too much, allowing chronic infections to persist if produced excessively. Current research on the microbiome of humans and other species is revealing a fundamental role in the interaction between the microbiota and the immune system in determining the health status of the host. In these studies, the cytokine interleukin-10 (IL-10) is emerging as an important player (Levast et al., 2015). IL-10 is an anti-inflammatory cytokine that helps regulate the immune response by inhibiting proinflammatory cytokines. Decreased levels of IL-10 have been found in individuals with schizophrenia, suggesting failure а of compensatory anti-inflammatory mechanisms (Arabska et al., 2022). Also, recent study provides new insights into the complex interplay between anti-inflammatory cytokines and generalized disorder anxiety (GAD) pathogenesis, suggesting that IL-10 may be associated with the pathophysiology and development of GAD (Sarmin et al., 2024).

Interleukin-12 (IL-12) and Interleukin-23 (IL-23): IL-12 and IL-23 are produced by antigenpresenting cells, such as dendritic cells and macrophages, and play a role in promoting Th1 and Th17 immune responses, respectively. IL-12 and IL-23 are involved in driving intestinal inflammation in Crohn's disease, inflammatory bowel disease and cancers (Aggeletopoulou et al., 2018; Tesmer et al., 2008; Verstockt et al., 2023) by promoting Th1 and Th17 immune responses (Aggarwal et al., 2003). IL-23 is involved in the pathogenesis of psoriasis by promoting Th17 cell differentiation, which enhances chronic skin inflammation (Tesmer et al., 2008; Zwicky et al., 2021). IL-12 produced by dendritic cells and macrophages, IL-12 promotes the differentiation of T cells into Th1 cells, which are essential for fighting intracellular pathogens. IL-12 bridges innate and adaptive immunity and is crucial for controlling viral and bacterial infections by promoting a Th1 immune response (Novelli & Casanova, 2004; Wozniak et al., 2006). Interleukin-12 (IL-12) and Interleukin-23 (IL-23) are pro-inflammatory cytokines that play important roles in immune system regulation. Increasing evidence suggests that these cytokines may also be involved in the pathophysiology of psychotic disorders, such as schizophrenia. IL-12 is primarily involved in the differentiation of naive T cells into Th1 cells, which produce interferon-gamma (IFN-y), a proinflammatory cytokine. Dysregulation of the Th1 immune response has been implicated in neuroinflammatory processes seen in schizophrenia and other psychotic disorders. IL-23 promotes the differentiation and maintenance of Th17 cells, which are implicated in autoimmune and inflammatory responses. Th17 cells produce IL-17, another pro-inflammatory cytokine that has been associated with psychiatric conditions (Wozniak et al., 2006).

**Interleukin-17 (IL-17)**: IL-17 is produced by a subset of T cells called Th17 cells (Aggarwal et al., 2003). It promotes inflammation by stimulating the production of other pro-inflammatory cytokines and recruiting neutrophils (Aggarwal et al., 2003; Ergen & Yusuf, 2018). IL-17 is a key mediator of skin inflammation, leading to the thickened, scaly patches characteristic of psoriasis (Ergen & Yusuf, 2018; Zwicky et al., 2021). IL-17 is involved in joint inflammation and destruction by enhancing the activity of other pro-inflammatory cytokines and contributing to bone erosion in RA. IL-17 contributes to the inflammatory damage of the central nervous system, leading to the

neurological symptoms of multiple sclerosis (Ergen & Yusuf, 2018), Interleukin-17 (IL-17) is a pro-inflammatory cytokine primarily produced by Th17 cells, a subset of T-helper cells. Its role in psychotic disorders, including schizophrenia and bipolar disorder, has been increasingly investigated of broader as part the understanding of immune system dysregulation in mental health conditions. Elevated levels of ILhave been found in patients 17 with schizophrenia and other psychotic disorders, suggesting that IL-17 may play a role in the immune-inflammatory mechanisms contributing to these conditions.

Interferon-gamma (IFN-y) is produced by T cells and natural killer (NK) cells and is involved in activating macrophages, enhancing their ability to destroy pathogens. In Autoimmune diseases. IFN-v is implicated in the pathogenesis of autoimmune diseases like multiple sclerosis (MS), type 1 diabetes, and systemic lupus erythematosus (SLE). It enhances immune responses that mistakenly target the body's own chronic infections tissues. In such as tuberculosis or viral hepatitis, IFN-y helps control the infection but can also contribute to tissue damage through prolonged activation of immune cells. IFN-y is a type II interferon produced mainly by T cells and natural killer (NK) cells. It activates macrophages, enhancing their ability to kill ingested pathogens, and promotes antigen presentation. IFN-y is crucial for defense against intracellular pathogens such as viruses and certain bacteria (e.g., Mycobacterium tuberculosis). Interferon-alpha/beta (IFN-α and IFN- $\beta$ ): These are type I interferons primarily involved in antiviral defense. They are produced by virus-infected cells and help in inhibiting viral replication and activating NK cells (Zhao et al., 2024). IFN- $\alpha$  and IFN- $\beta$  are essential for controlling viral infections by enhancing the antiviral state of surrounding cells and stimulating immune cell activity (Zhao et al., 2024). IFN- $\alpha$  is used as a therapeutic agent in certain viral infections (e.g., hepatitis C) and some cancers. However, treatment with IFN- $\alpha$  is often associated with neuropsychiatric side effects, including depression, anxiety, and even psychosis. This suggests that interferons may have a direct effect on brain function (Zhao et al., 2024).

**Transforming Growth Factor-beta (TGF-\beta)**: TGF- $\beta$  has both pro-inflammatory and antiinflammatory roles depending on the context. It is involved in tissue repair, immune suppression, and the regulation of other immune responses. In diseases such as pulmonary fibrosis, liver cirrhosis, and chronic kidney disease (Budi et al., 2021), TGF-β promotes excessive tissue repair and the deposition of extracellular matrix, leading to tissue scarring and organ dysfunction (Budi et al., 2021; Hourani et al., 2024). TGF-β can contribute to cancer progression by promoting tumor cell invasion, immune evasion, and metastasis (Budi et al., 2021; Hourani et al., 2024). TGF- $\beta$  is involved in the regulation of immune responses. In some autoimmune conditions, its dysregulation can contribute to inflammation and tissue damage. For instance, in rheumatoid arthritis and lupus, TGF- $\beta$  can promote the activation of pathogenic immune cells (Li et al., 2006). In the context of psychotic disorders, such as schizophrenia, TGF-B has emerged as a molecule of interest due to its involvement in neuroinflammation. neurodevelopment, and synaptic plasticity (Adamu et al., 2024; Kolliker-Frers et al., 2021). TGF- $\beta$  generally acts as an anti-inflammatory cytokine by suppressing pro-inflammatory responses in the brain (Adamu et al., 2024; Kolliker-Frers et al., 2021). Chronic inflammation and immune dysregulation are thought to play significant roles in the pathophysiology of psychotic disorders, especially schizophrenia (Adamu et al., 2024; Kolliker-Frers et al., 2021). Lower levels of TGF-<sup>β</sup> have been associated with increased inflammation in the brain, which may contribute to the development of psychotic symptoms (Adamu et al., 2024; Kolliker-Frers et al., 2021). Dysregulation of TGF- $\beta$  signaling could lead to overactivation of microglia, contributing to neuroinflammation in psychotic disorders (Adamu et al., 2024; Kolliker-Frers et al., 2021).

**Tumor Necrosis Factor-alpha (TNF-α)**: TNF-α pro-inflammatory cytokine а primarily is produced by macrophages (Idriss & Naismith, 2000), it plays a central role in inflammation by promoting the activation of immune cells and the expression of other inflammatory molecules (Balkwill, 2006; Chen et al., 2018; Idriss & Naismith, 2000; Jang et al., 2021; Lanka et al., 2024). TNF- $\alpha$  promotes the inflammation of joints, leading to pain, swelling, and destruction of cartilage and bone rheumatoid arthritis (RA). Overproduction of TNF-a is linked to chronic inflammation in the gut, contributing to inflammatory bowel diseases like Crohn's disease, ulcerative colitis and other autoimmune diseases (Balkwill, 2006; Jang et al., 2021). TNF- $\alpha$  contributes to lung inflammation and

tissue destruction resulting to obstructive pulmonary diseases (COPD). TNF-α promotes chronic skin inflammation and excessive skin cell proliferation in psoriasis (Li et al., 2019). TNF-α promotes inflammation by inducing fever, increasing vascular permeability, and recruiting immune cells to the site of infection (Dorhoi & Kaufmann, 2014). It helps in controlling infections by stimulating the immune response but can also cause tissue damage if overproduced, contributing to conditions like septic shock (Georgescu et al., 2020). TNF- $\alpha$  is another pro-inflammatory cytokine that plays a crucial role in systemic inflammation and immune regulation (Georgescu et al., 2020). Increased TNF- $\alpha$  levels have been found in patients with schizophrenia and bipolar disorder (Hope et al., 2013; Millett et al., 2020). Elevated TNF- $\alpha$  may contribute to neurodegenerative processes observed in these disorders by promoting oxidative stress and apoptosis (Hope et al., 2013; Millett et al., 2020).

### 2. HPA AXIS DYSREGULATION

The hypothalamic-pituitary-adrenal (HPA) axis plays a crucial role in the body's response to stress (McEwen, 2007). Chronic activation of this system, often seen in response to infections and chronic diseases (Chang, 2011), can result in an overproduction of cortisol, elevated cortisol levels have been linked to psychiatric disorders like depression, anxiety, and PTSD (Hewagalamulage et al., 2016; McEwen, 2007; O'Connor et al., 2020). Severe infections can cause prolonged activation of the HPA axis. leading to stress-related psychiatric symptoms. metabolic syndrome Conditions like and cardiovascular disease are known to dysregulate the HPA axis (Chang, 2011). Overactivation of the HPA axis, commonly seen in depression and anxiety, increases stress responses, which worsen psychiatric symptoms (McEwen, 2007; O'Connor et al., 2020). The hypothalamicpituitary-adrenal (HPA) axis in infection is a major neuroendocrine system that plays a crucial role in the body's response to stress, including during infection. It involves interactions between the hypothalamus, pituitary gland, and adrenal glands and leads to the secretion of hormones, such as cortisol, which helps modulate the immune response. When the body detects an infection, immune cells release proinflammatory cytokines, these cytokines signal the hypothalamus to activate the HPA axis. The hypothalamus responds by secreting corticotropin-releasing hormone (CRH) and

arginine vasopressin (AVP) (Papadimitriou & Priftis. 2009: Sukhareva. 2021). These hormones stimulate the pituitary gland and then releases adrenocorticotropic hormone (ACTH), which travels through the bloodstream to the adrenal glands that produces and releases cortisol, a glucocorticoid hormone, in response to ACTH (Chen et al., 2018; Papadimitriou & Priftis, 2009; Sukhareva, 2021). Dysregulation of the HPA axis plays a significant role in psychotic disorders (Chan et al., 2010; Mikulska et al., 2021; Murphy et al., 2022). Major depression is associated with hyperactivation of the HPA axis and elevated cortisol levels, which can worsen both psychological and physical symptoms in patients with chronic illness (Chan et al., 2010; Mikulska et al., 2021; Murphy et al., 2022). Dysregulation of this axis has been extensively studied in the context of psychotic disorders, especially schizophrenia. Many studies have reported elevated levels of cortisol in individuals with psychotic disorders, particularly during acute phases of illness, indicating hyperactivity of the HPA axis (Chan et al., 2010; Mikulska et al., 2021; Murphy et al., 2022).

#### 3. NEUROINFLAMMATION

Neuroinflammation, chronic diseases. and infections share several common pathways, particularly in the context of immune responses, signaling cascades, and cellular processes that contribute to disease progression. In the brain, microglial cells (resident immune cells) become activated during neuroinflammation, producing pro-inflammatory cytokines and reactive oxygen species (ROS) (Adamu et al., 2024; Andronie-Cioara et al., 2023; Ly et al., 2023). Chronic activation of microglia is a hallmark of neurodegenerative diseases such as Alzheimer's and Parkinson's (Adamu et al., 2024; Andronie-Cioara et al., 2023; Ly et al., 2023). In chronic diseases and infections (Adamu et al., 2024), macrophages also become activated, releasing inflammatory mediators and contributing to damage, fibrosis, and tissue systemic inflammation (Adamu et al., 2024; Ly et al., 2023).

The overproduction of ROS and reactive nitrogen species (RNS) leads to cellular damage, DNA mutations, and protein degradation (Wadhwa et al., 2018; Zarkovic, 2020). This is a common pathway in neuroinflammation (Wadhwa et al., 2018), chronic diseases (e.g., atherosclerosis, diabetes) (Jomova et al., 2023), and during infections

(Zarkovic, 2020). ROS-induced damage can result in neurodegeneration (e.g., Alzheimer's) et al., 2018) and systemic (Wadhwa complications (e.g., in diabetes or chronic infections like HIV) (Zarkovic, 2020). NF-κB Pathway is a key regulator of the immune response to infection (Poladian et al., 2023), inflammation, and cellular stress (Baker et al., controls 2011: Zarkovic, 2020). It the transcription of genes involved in inflammation, immune responses, and cell survival. Persistent activation of NF-kB is associated with chronic inflammatory diseases (like rheumatoid arthritis, inflammatory bowel disease) (Baker et al., 2011; Jomova et al., 2023) and neuroinflammatory Dysfunctional mitochondria condition. are sources of ROS, contributing to oxidative stress and inflammation. Mitochondrial damage is a feature of neurodegenerative diseases (Wadhwa et al., 2018) and is also implicated in chronic conditions such as type 2 diabetes and cardiovascular diseases (Jomova et al., 2023). In infections, pathogens can directly target mitochondria manipulate host to cell responses, further enhancing inflammation (Andrieux et al., 2021; Foo et al., 2022; Poladian et al., 2023).

Blood-Brain Barrier (BBB) Disruption. In neuroinflammation, BBB integrity is often compromised, allowing peripheral immune cells, cytokines, and pathogens to infiltrate the brain, exacerbating inflammation (Mapunda et al., 2022; Sanmarco et al., 2021). This is seen in conditions like encephalitis, multiple sclerosis, and systemic infections like sepsis (Haruwaka et al., 2019; Ortiz et al., 2014). Chronic diseases such as hypertension and diabetes can also disrupt BBB function, contributing to neuroinflammation (Mapunda et al., 2022; Mayer & Fischer, 2024; Michalicova et al., 2020; Sanmarco et al., 2021).

Inflammasome Activation: NLRP3 inflammasome is a protein complex that becomes activated in response to cellular stress, infection, and metabolic disturbances (Fu & Wu, 2023; Han et al., 2023; Li et al., 2023; Liu et al., 2018). It plays a central role in producing various cytokines which are key mediators of inflammation (Li et al., 2023). Dysregulation of the inflammasome is implicated in neuroinflammatory diseases (e.g., Alzheimer's) well as as chronic metabolic conditions like obesity, type 2 diabetes and in various infections (Alonaizan, 2024; Han et al., 2023; Li et al., 2023; Xu et al., 2019).

Gut-Brain Axis and Systemic Inflammation. Disruptions in the gut microbiome can lead to systemic inflammation, which in turn can affect brain function contribute and to neuroinflammation (Mou et al., 2022; Zhao et al., 2021). This link is seen in diseases like multiple sclerosis, depression, and chronic infections. The gut-brain axis is a key pathway in both chronic systemic diseases like inflammatory bowel disease and neuroinflammatory processes (Mou et al., 2022; Ruze et al., 2023; Zhao et al., 2021).

#### 4. PSYCHIATRIC SYMPTOMS ASSOCIATED WITH INFECTION AND CHRONIC DISEASES

**Depression**: Depression is one of the most common psychiatric conditions in individuals with infection and chronic diseases such as HIV/AIDS, COVID-19, tuberculosis, Cancer, and cardiovascular diseases (Gazdag et al., 2014; Munjal et al., 2017). It can result from the emotional stress of living with a chronic illness, social stigma, and the neurological impact of the microorganisms itself (Gazdag et al., 2014; Munjal et al., 2017).

**Anxiety**: Anxiety disorders, including generalized anxiety disorder, panic disorder, and post-traumatic stress disorder (PTSD), are prevalent among those with cancer, COVID-19, HIV/AIDS and related heart diseases (Gazdag et al., 2014; Munjal et al., 2017). Concerns about health, finance, relationships, societal stigma, and future uncertainties contribute to these feelings.

**Cognitive Impairment**: HIV-associated neurocognitive disorders (HAND) can range from mild cognitive decline to severe dementia (Gazdag et al., 2014; Munjal et al., 2017). Cognitive impairments can affect memory, concentration, and decision-making abilities, impacting daily functioning (Gazdag et al., 2014; Munjal et al., 2017).

### 5. PROSPECTIVE THERAPEUTIC APPLICATIONS IN MENTAL DISORDERS, INFECTION AND CHRONIC DISEASES

**Probiotic and mental disorders:** A probiotic is a live organism that, when ingested in adequate amounts, exerts a health benefit (Kim et al., 2019). Gut microflora can also be balanced by directly adding live microorganisms into the diet. The genera and species that have been used

are Lactobacillus. Streptococcus. Leuconostoc. Pediococcus. Propionibacterium. Enterococcus. Bifidobacterium. Bacillus. Saccharomyces cerevisiae, Candida pintolopesii, Aspergillus niger and A. oryzae (Kim et al., 2019). Their use in mental illness has been reviewed more extensively elsewhere (Dicks, 2022; Dicks et al., 2021). Several members of the microbiota are known to produce neurotransmitters such as dopamine, gamma aminobutyric acid (GABA), norepinephrine, serotonin (5-HT), acetylcholine, and endocannabinoids (Dicks, 2022; Dicks et al., 2021). This, together with the finding that ingestion of Bifidobacterium infantis in rats increases the levels of tryptophan (Desbonnet et al., 2008), supports the hypothesis that the microbiota plays a role in the modulation of neurotransmitter levels and possibly also mood (Desbonnet et al., 2008; Dicks, 2022; Dicks et al., 2021).

Probiotics and chronic diseases: Probiotics, beneficial live microorganisms, are increasingly studied for their role in managing chronic diseases (Yadav et al., 2022). Their primary application involves restoring and maintaining a balanced gut microbiome, which is critical for immune function, metabolism, and inflammation regulation (Yadav et al., 2022). In chronic diseases like chronic kidney disease and inflammatory bowel disease (IBD) (Cooper et al., 2023; Ewaschuk & Dieleman, 2006), probiotics can help reduce inflammation and promote intestinal healing (Cooper et al., 2023; Ewaschuk & Dieleman, 2006; Yadav et al., 2022; Zhu et al., 2021). For cardiovascular disease, they may improve lipid profiles by lowering cholesterol levels (Singh et al., 2017; Yadav et al., 2022). In diabetes, probiotics aid in regulating blood glucose by enhancing insulin sensitivity. They also show promise in managing obesity, nonalcoholic fatty liver disease (Shen et al., 2024; Singh et al., 2017; Yadav et al., 2022).

Probiotics and infection: Probiotics play a promising role in managing and preventing infectious diseases (Adeniyi et al., 2024; Darbandi et al., 2021). They help restore the balance of gut microbiota, which can be disrupted during infections or antibiotic treatments (Adeniyi et al., 2024; Li et al., 2022; Tegegne & Kebede, 2022; Yadav et al., 2022). Probiotics such as Lactobacillus and Bifidobacterium species are particularly effective gastrointestinal infections like against Clostridium difficile, Helicobacter pylori, Salmonella spp and acute diarrhea caused by

viral or bacterial pathogens in human (Adenivi et al., 2024; Adeniyi et al., 2015; Li et al., 2022; Tegegne & Kebede, 2022; Yadav et al., 2022) and animals (Adetoye et al., 2018; Adeniyi and Olorunnisola, 2024). They work by enhancing the gut's natural barrier, modulating immune responses, and competing with pathogens for adhesion sites and nutrients. In respiratory infections, some studies suggest probiotics can reduce the severity and duration of symptoms by strengthening immune defenses. They also show potential in preventing urinary tract infections (UTIs) by inhibiting pathogen colonization in the urogenital tract (Adeniyi et al., 2024; Li et al., 2022; Tegegne & Kebede, 2022; Yadav et al., 2022).

#### 6. NATURAL PRODUCT

The use of natural products in managing psychotic disorders has garnered interest due to their potential benefits and fewer side effects compared to conventional antipsychotic medications (Hoenders et al., 2018; Kulamarva et al., 2023; Saleem et al., 2022). While research on natural remedies is still emerging, several herbs, nutrients, and supplements have shown promise for supporting mental health and may complement standard treatments for psychosis, schizophrenia, anxiety/depression, or related condition (Hoenders et al., 2018; Kulamarva et al., 2023; Saleem et al., 2022).

Natural products, derived from plants, animals, and microorganisms, have been extensively used in the management of infectious diseases for centuries (Chopra & Dhingra, 2021; Dias et al., 2012; Jugran et al., 2021). They offer a diverse array of bioactive compounds that can serve as alternatives or complements to synthetic drugs, particularly in an era of rising antimicrobial resistance (Chopra & Dhingra, 2021; Dias et al., 2012; Jugran et al., 2021). Examples: Alkaloids (e.g., berberine from Berberi's species): Possess broad-spectrum antibacterial activity. Flavonoids (e.g., quercetin): Inhibit bacterial growth by targeting bacterial enzymes. Essential oils (e.g., tea tree oil, oregano oil): Effective against Gram-positive and Gram-negative bacteria (Khare et al., 2021; Othman et al., 2019). Curcumin (from turmeric): Can reverse antibiotic resistance in some strains hv interferina with bacterial resistance mechanisms (Dai et al., 2022; Hussain et al., 2022). Natural products have long been used in the management of chronic diseases due to their wide range of bioactive compounds, which often have therapeutic effects (Kroth et al., 2021; Puri et al., 2022; Rios et al., 2015). These products, derived plants, from animals, and microorganisms, can act as antioxidants, antiinflammatory agents, immune modulators, in the management of mental health (Cortez-Navarrete et al., 2023) or even target specific metabolic pathways.

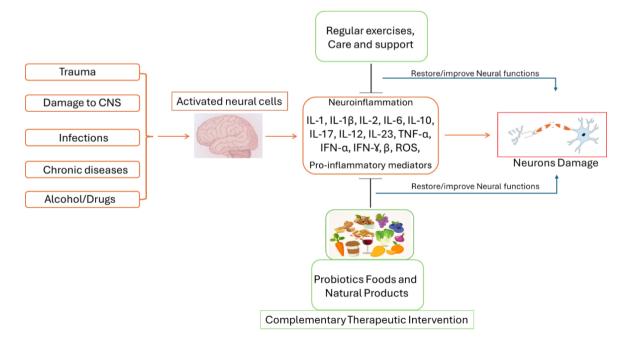


Fig .1. Therapeutic Applications in Mental Disorders

	Natural product/Sources	Function	Ref
	Omega-3 Fatty Acids	Omega-3 fatty acids, particularly eicosapentaenoic acid (EPA), have anti- inflammatory effects and may help improve mood, cognitive function, and reduce the severity of psychotic symptom	(Bozzatello et al., 2016)
			(Gow & Hibbeln, 2014)
			(Hsu et al., 2020)
Psychotic disorders	Extract from the Ginkgo biloba tree	Ginkgo biloba is believed to improve blood flow to the brain and has antioxidant properties. It may help in reducing the cognitive symptoms of schizophrenia when used as an adjunct to antipsychotic medications.	(Singh et al., 2010) (Chandrasekaran et al., 2001)
			(Doruk et al., 2008)
	Curcumin (Turmeric)	Curcumin, the active compound in turmeric, has anti-inflammatory and antioxidant properties. It is thought to modulate neurotransmitter pathways and reduce inflammation in the brain, which may play a role in managing psychosis	(El-Saadony et al., 2022) (Spanoudaki et al., 2024) (Adeniyi et al., 2024)
	N-Acetylcysteine (NAC)	NAC is a precursor to glutathione, an antioxidant that reduces oxidative stress in the brain. Studies have shown that NAC may help alleviate symptoms of schizophrenia, including negative symptoms such as social withdrawal, and improve overall functioning.	(Dean et al., 2011) (Lane et al., 2008)
	Passionflower (Passiflora incarnata)	Passionflower has been traditionally used to treat anxiety and insomnia, which are often comorbid with psychosis. It may have mild sedative properties, helping with agitation or sleep disturbances	(Janda et al., 2020) (da Fonseca et al., 2020)
		Valerian root is often used as a sleep aid and for reducing anxiety. Since sleep disturbances and anxiety can exacerbate psychotic symptoms, valerian may help	(Tammadon et al., 2021)

# Table 1. Natural products and functions in management of depression/anxiety/psychoticdisorders

Natural product/Sou	Function Irces	Ref
Valerian Roo	t improve these secondary symptoms.	(Sahin et al., 2024)
Saffron ( <i>Croc</i> sativus)	Saffron has been traditionally used to improve mood and has shown potential in treating depression and anxiety. Given its neuroprotective and anti-inflammatory effects, it may provide adjunctive support in treating negative symptoms in psychotic disorders.	(Bian et al., 2020) (Omidkhoda &
B Vitamins (e B6, B12, Fola Found in who grains, leafy greens, mean and fortified foods.	ble especially folate and B12, have been linked to cognitive and mental health problems, and supplementation may help reduce the severity of psychotic	(Kale et al., 2010) (Hoffer, 2008)

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	Natural product/Sources	Function	Ref
Diabetes	Cinnamon, Bitter melon and Fenugreek	Contains fibers and soluble compounds that may improve insulin sensitivity and lower blood sugar levels	(Verma et al., 2016)
	Garlic	Garlic: Known for its ability to reduce blood pressure and improve cholesterol levels.	(Ried, 2020)
			(Banerjee & Maulik, 2002)
Cardiovascular Disease	Omega-3 fatty acids	lower triglycerides, reduce inflammation,	(Zivkovic et al., 2011)
	and improve heart function.	(Shearer et al., 2012)	
	Flavonoids	Flavonoids (from berries, green tea, dark chocolate): Act as antioxidants and help	(Grassi et al., 2010)

# Table 2. Natural products and functions in management of metabolic diseases.

	Natural product/Sources	Function	Ref
		improve endothelial function, thus reducing the risk of CVD	(Rees et al., 2018)
	Curcumin	Curcumin (Turmeric): Has anti- inflammatory and antioxidant properties and may inhibit the growth of cancer cells.	(Zoi et al., 2021) (Singh et al., 2011)
Cancer	Green Tea	Green Tea (EGCG): Contains epigallocatechin gallate, which has been shown to suppress tumor growth and improve the body's detoxification process.	(Jang et al., 2022) (Florio et al., 2023)
	Resveratrol	Resveratrol (Grapes, Red Wine): Acts as an antioxidant and has anti-cancer properties by inhibiting cancer cell proliferation.	Karabekir & Ozgorgulu, (2020)
	Glucosamine /Chondroitin	Glucosamine and Chondroitin: Commonly used supplements for osteoarthritis to reduce joint pain and improve mobility.	(Zhu et al., 2018)
Arthritis and Joint Disorders	Boswellia	Boswellia: A herbal extract with anti- inflammatory properties, often used to reduce symptoms of osteoarthritis and rheumatoid arthritis.	(Siddiqui, 2011)
	Omega-3 fatty acids	Omega-3 Fatty Acids: Also play a role in reducing joint inflammation in rheumatoid arthritis.	(Goldberg & Katz, 2007)
Chronic Inflammatory Condition	Ginger	Ginger: Has anti-inflammatory and analgesic properties, used to manage conditions like osteoarthritis and digestive inflammation.	(Szymczak et al., 2024)
	Turmeric	Turmeric: Reduces chronic inflammation and is used in conditions such as inflammatory bowel disease (IBD) and arthritis.	(He et al., 2015) (Bahrami et al., 2020)
	Aloe vera	Aloe Vera: Often used to soothe inflammation in skin conditions and gut disorders like ulcerative colitis	(Barton et al., 2022)
	Curcuma longa L.	<i>Curcuma longa</i> (Curcumin): significantly reduced chronic inflammation and HP- induced gastric lesions, as assessed both	(Mahady et

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	Natural product/Sources	Function	Ref
	Diospyros spp	macroscopically and microscopically in <i>Mongolian gerbils</i> .	al., 2006)
		Some bi-naphthoquinones from <i>Diospyros</i> sp. have anti-inflammatory activity.	Kuke et al, 1998
Chronic Respiratory Diseases (Asthma, COPD)	Licorice root	Licorice Root: Used to soothe airways and reduce inflammation in respiratory conditions.	(Hocaoglu et al., 2011)
	NAC Honey	N-Acetylcysteine (NAC): A precursor to glutathione, used to thin mucus and improve lung function in COPD.	(Sadowska et al., 2006)
	попеу	Honey: Often used to soothe cough and irritation in the respiratory tract, particularly in asthma.	
			(Goldman, 2014)
Liver Diseases	Silymarin	Milk Thistle (Silymarin): Used for its hepatoprotective effects in managing liver diseases like hepatitis and cirrhosis.	(Vargas- Mendoza
	Dandelion root	Dandelion Root: Known for its detoxifying properties and support for liver function.	et al., 2014)
			(Pfingstgra et al., 2021)
	Green tea Extract	Green Tea Extract: Increases fat oxidation and improves metabolic rate, helping in weight management.	(Roberts e al., 2021)
Obesity and Metabolic Syndrome	Apple cider	Apple Cider Vinegar: May help with weight loss by promoting satiety and stabilizing blood sugar levels.	(Abou- Khalil et al., 2024)
	Capsaicin	Capsaicin (from chili peppers): Increases energy expenditure and fat oxidation, helping in weight management.	
			(Zheng et al., 2017)

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#### 7. POSSIBLE SIDE EFFECTS OF NATURAL PRODUCTS

The general population believes that natural products, such as "health foods" and herbal medicines, are reliable and beneficial. nonetheless, care must be taken when using natural products. Preclinical studies have revealed that natural products can prevent or treat a variety of ailments, including cancer, cvstic fibrosis, infection, and neurological disorders (Bailey & Dresser, 2004; Basaran et al., 2022; Hewlings & Kalman, 2017). Based on phase I clinical data on oral curcumin dosing at 8,000 mg/day, there have been no significant side effects other than moderate nausea and diarrhea (Hewlings & Kalman, 2017). However, excessive use of any natural substance might gut flora, disrupting normal affect the physiological and immunological processes (Bailey & Dresser, 2004; Basaran et al., 2022; Hewlings & Kalman, 2017). Furthermore, the simultaneous use of medications and some medicinal plants can have major side effects and reduce the efficacy of the therapy. When medications with a defined therapeutic index are combined with plants that can impact drug metabolizing enzymes and disturb systemic circulation, such as bioavailability or excretion, unexpected adverse effects may occur (Bailey & Dresser, 2004; Basaran et al., 2022; Hewlings & Kalman, 2017).

## 8. CONCLUSION

Inflammatory cytokines are crucial for initiating and regulating the immune response during infections. However, while they help clear pathogens, an excessive cytokine response can cause tissue damage and worsen the infection. Balancing cytokine activity is critical for effective immunity without causing harmful inflammation. In chronic diseases, inflammatory cytokines are key drivers of ongoing tissue damage and immune system dysfunction. These cytokines play a double-edged role: while essential for host defense and healing, their prolonged or excessive activity can contribute to disease progression.

#### CONSENT AND ETHICAL APPROVAL

It is not applicable.

#### **DISCLAIMER (ARTIFICIAL INTELLIGENCE)**

Author(s) hereby declare that NO generative Al technologies such as Large Language Models

(ChatGPT, COPILOT, etc.) and text-to-image generators have been used during the writing or editing of this manuscript.

#### **COMPETING INTERESTS**

Authors have declared that no competing interests exist.

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