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Redesigning Psychiatry - The new era of biotechnology, the microbiome, and translational neuroscience

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Psychiatry has long relied on neurotransmitter-based model, treating mental disorders primarily through drugs that modulate serotonin, dopamine, norepinephrine. While this model brought relief to many, emerging evidence from highimpact journals suggests it is no longer sufficient to explain or treat the complexity of psychiatric conditions.

Groundbreaking research from institutions like King's College London, Stanford University, and the NIH is reshaping our understanding of the brain and mental health. This article explores the convergence of biotechnology, microbiome science, and translational neuroscience, highlighting how these domains are redefining psychiatric diagnosis, treatment, and prevention.

The decline of the serotonin hypothesis

The serotonin hypothesis of depression, once dominant, has been critically challenged. A comprehensive umbrella review by Moncrieff et al., published in *Molecular Psychiatry* (2022), concluded that there is no consistent evidence linking depression to low serotonin levels. This has major implications for the widespread prescription of selective serotonin reuptake inhibitors (SSRIs).

According to the WHO, over 280 million people worldwide suffer from depression, and up to

30% do not respond to standard pharmacological treatments—a condition known as treatment-resistant depression. This reality has accelerated the search for personalized and innovative solutions.

The rise of biotechnology in Psychiatry

Biotechnology offers tools to personalize care and investigate the biological mechanisms of mental illness beyond chemical imbalance. These include genomic profiling, epigenetic markers, and especially, microbiome-based therapies.

Recent clinical trials (e.g., Liu et al., Journal of Affective Disorders, 2022) have shown that supplementation with specific psychobiotic strains can significantly reduce symptoms of depression and anxiety. Strains like Lactobacillus rhamnosusand Bifidobacterium longum modulate inflammation, stimulate GABA production, and restore gut-brain axis integrity.

The microbiome and the gut-brain axis

The human gut hosts over 100 trillion microorganisms influencing neurodevelopment, immune regulation, and neurotransmitter synthesis. Cryan et al. (*Nature Reviews Neuroscience*, 2020) describe the gut-brain axis as a bidirectional system crucial for emotional and cognitive regulation.

This system includes neural, endocrine, immune, and metabolic pathways. For example, short-chain fatty acids produced by gut bacteria cross the blood-brain barrier and exert neuroprotective and anti-inflammatory effects. Dysbiosis has been linked to disorders such as autism, schizophrenia, and bipolar disorder.

Translational neuroscience: From bench to bedside

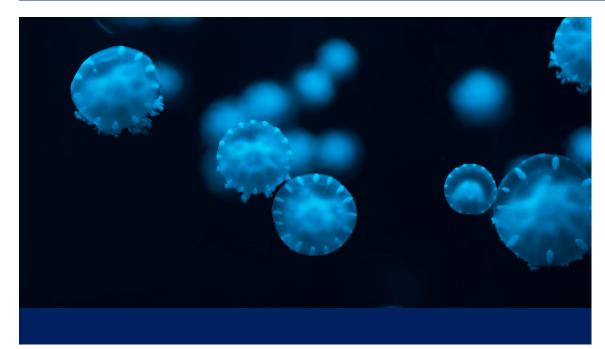
Translational neuroscience transforms molecular and cellular discoveries into clinical applications. In psychiatry, this includes the use of neuroimaging, inflammatory biomarkers, and real-time EEG to monitor therapeutic response. Strawbridge et al. (*Psychological Medicine*, 2019) found that patients with elevated CRP and IL-6 respond better to anti-inflammatory agents than to SSRIs.

Experimental interventions such as fecal microbiota transplantation (FMT) are showing promise in mood disorder treatment by restoring gut microbial health. Nutritional strategies, next-generation psychobiotics, and vagus nerve stimulation are also being explored as non-pharmacological tools.

Beyond the DSM: The RDoC framework

The DSM-5 has faced criticism for its

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categorical, symptom-based approach. The U.S. National Institute of Mental Health (NIMH) introduced the Research Domain Criteria (RDoC) framework to promote dimensional, biologically valid evaluations across cognitive, affective, and social domains.

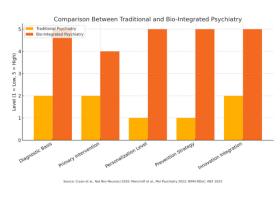
RDoC aligns with precision psychiatry by integrating genetic, microbial, neuroimaging, and behavioral data to create more predictive and individualized treatments. It sees mental disorders not as static labels but as dynamic processes shaped by biology, microbiota, and environment.

Comparative Table

Attribute	Traditional Psychiatry	Bio-Integrated Psychiatry
Diagnostic Basis	Symptoms (DSM-based)	Biomarkers, Microbiome, Imaging
Primary Intervention	Psychotropic Drugs	Psychobiotics, Nutraceuticals
Personalization Level	Low	High (genomic, microbial, metabolic)
Preventive Strategy	Minimal	Central Focus
Innovation Integration	Low	High (AI, Biotech, Neuroimmunology)

Source: Adapted from Cryan et al., Nat Rev Neurosci 2020; Moncrieff et al., Mol Psychiatry 2022; Strawbridge et al., Psychol Med 2019; NIMH RDoC; WEF Neurotech Report 2023.

Comparative Graph



Source: Cryan et al., Nat Rev Neurosci 2020; Moncrieff et al., Mol Psychiatry 2022; NIMH

Global challenges and opportunities

Integrating these innovations into clinical practice requires navigating regulatory, ethical, and financial barriers. In countries like Brazil, psychiatry remains largely pharmacocentric. However, institutions such as Fiocruz and research groups like GOn1 Biotech are leading validation studies of microbiome-focused therapies.

Global investment in mental health innovation is rapidly growing. According to the World Economic Forum (2023), the neurotechnology market is expected to surpass \$25 billion by 2030, driven by demand for effective and personalized solutions. Public-private partnerships and modern regulatory frameworks will be critical for safe implementation.

Conclusion

Psychiatry is at a turning point. The convergence of neuroscience, microbiology, and biotechnology compels us to view mental health not as isolated symptoms but as a complex, systemic phenomenon.

The future of psychiatry will be written not only through molecules but through networks, systems, and the intelligent integration of multiple scientific domains. Reforming psychiatric care is not just an academic exercise, but a human imperative—to welcome science with purpose, to treat each person with precision, and to build therapeutic paths worthy of the human mind.

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