

Basic scientific facts about food coma: A brief description.

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Food Coma

The feeling of being tired after eating a meal is known as postprandial somnolence, or a food coma.

Because many people see the effects in the early afternoon after lunch, it's also known as the "post-lunch dip."

Sleepiness, lethargy, physical tiredness, low energy levels, and poor focus are some of the symptoms you may experience.

Furthermore, despite the term's inclusion of the word "coma," there is no loss of consciousness. This hazardous medical condition should not be confused with food comas.

What Causes a Food Coma?

Food comas aren't well investigated, despite their prevalence. Several theories about what causes food comas have been refuted or challenged, while others may be scientifically credible. Keep in mind, however, that there is relatively little contemporary research accessible [1,2].

Changes in blood circulation

For a long time, food comas were thought to be caused by a decrease in blood flow to the brain due to an increase in blood flow to the gut.

This notion, however, has been debunked. In many stressful conditions, such as during exercise, when your muscles require more blood, your body is able to sustain blood flow to your brain.

As a result, blood flow to your intestines is unlikely to divert enough blood to create tiredness.

In fact, according to an older study, blood flow to the brain may rise after meals.

While a more recent, modest study discovered a reduction in blood flow to the brain after lunch, this effect was only observed in persons who had skipped breakfast.

Eating a big meal

After eating large or heavy meals, many people have food comas.

Larger meals, especially those heavy in protein and salt, were associated with prolonged post-meal sleep in fruit flies [2].

In a study of men who ate pizza, those who overate, felt less energy and increased physical exhaustion, sleepiness, and

lethargy in the four hours after their meal, but those who ate until they were pleasantly full reported no negative effects [3].

A smaller, older study evaluated the effects of a modest lunch with a big lunch with three times the calories on driving and tiredness. Over a 2-hour period, the impact of a large meal increased the number of times drivers diverted from their lane. Large meals appear to be a trigger for postprandial somnolence in all of these investigations [4].

Meals high in carbs, fat, or protein

Food comas have been connected to carbohydrate, lipid, and protein-rich meals.

These macronutrients may induce sleepiness through a variety of methods. They may also have an impact on one another.

High-carbohydrate meals, for example, may enhance blood levels of the amino acid tryptophan, which raises the amount of serotonin – a sleep hormone – in your brain.

Furthermore, if high-protein meals contain foods high in tryptophan, they may help you go asleep. Chicken, eggs, cheese, fish, turkey, milk, and tofu are among these foods.

Combining calorie-dense, high-fat, high-carb meals causes the release of cytokines, which are tiny proteins linked to weariness.

Additionally, high-fat or high-protein meals may enhance levels of the peptide YY and the hormone cholecystokinins, all of which can make you feel sleepy.

Foods and released hormones, neuropeptides, inflammatory proteins, and other chemicals have a complicated interaction. More research is needed to determine which, if any, factors contribute to tiredness [4,5].

How long does a Food Coma Last?

There has been no research explicitly looking into how long food comas linger.

However, some studies show that the effects of a heavy lunch might persist up to four hours

Anecdotal reports of people feeling fatigued up to a few hours after eating corroborate this theory.

Keep in mind that other circumstances, such as a bad night's sleep or consuming alcohol, can affect the length and severity of your weariness.

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References

1. Jameson SM. Dystopian film on the edge of a food coma. *New Cinemas: J Contemporary Film*. 2018;16(1):43-56.
2. Pandit C, Graham C, Selvadurai H, et al. Festival food coma in cystic fibrosis. *Pediatr Pulmonol*. 2013;48(7):725-27.
3. Khoory J, Rupal A, Jani C, et al. Food Coma: Hyperammonemic encephalopathy from refeeding syndrome. *Cureus*. 13(10): e18898.
4. Boelsma E, Brink EJ, Stafleu A, et al. Measures of postprandial wellness after single intake of two protein-carbohydrate meals. *Appetite*. 2010;54(3):456-64.
5. Wurtman, RJ, Wurtman, JJ, Regan, MM, et al. Effects of normal meals rich in carbohydrates or proteins on plasma tryptophan and tyrosine ratios. *Am J Clin Nutr*. 2003;77(1):128-132.