

## The psycho-neuro-endocrine-immune (PNEI) axis: Unravelling the intricate link between mind, motor neurons, master immune-endocrines, motility, microbiome and metabolic chaos

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### Introduction

The global obesity epidemic, coupled with the alarming rise of insulin resistance and metabolic syndrome, poses a formidable challenge to public health. Interaction between the gut and the brain is essential for energy homeostasis. In obesity, this homeostasis is disrupted. While traditional views have focused on diet and exercise, a more nuanced understanding is emerging—one that connects our mental state, nervous system, hormonal balance, and immune function to the all-rounder par excellence gut secretory-motility aspects affecting trillions of microorganisms in our gut. This intricate communication network is known as the Psycho-Neuro-Endocrine-Immune (PNEI) axis, and its disruption may be a key driver of the obesity crisis. The crucial role of the gut microbiota in the Gut–Brain Axis in obesity cannot be underestimated.

For too long, the mind and body have been treated as separate entities, a philosophical and medical duality that has hindered our understanding of complex illnesses. The PNEI framework shatters this outdated concept, providing a cohe-

sive model that shows how psychological stress can initiate a cascade of biological changes that disrupt gut health and metabolism.

### The PNEI axis and the stress-induced cascade

Stress, both acute and chronic, is a central driver of this process. The brain, perceiving a threat, activates the Hypothalamic-Pituitary-Adrenal (HPA) axis, flooding the body with stress hormones like cortisol. This response, intended for short-term survival, has detrimental long-term effects when chronically triggered. Elevated cortisol levels have been shown to directly increase visceral fat accumulation and promote insulin resistance.

Simultaneously, the PNEI axis orchestrates a shift in the immune system, leading to a state of chronic, low-grade inflammation. This inflammation is a key hallmark of obesity and metabolic syndrome. In adipose tissue, it impairs insulin signalling, creating a vicious cycle where inflammation exacerbates insulin resistance, and poor metabolic control further fuels inflammation.

## The microbiome's metabolic footprint

At the core of this complex system is the gut microbiome—a vast, dynamic ecosystem of bacteria and other microorganisms. The PNEI axis directly influences this microbial community through mechanisms such as altered gut motility and stress-induced changes in the gut environment. A high-fat, high-sugar diet can also directly and rapidly alter the gut's microbial make-up, leading to a state of dysbiosis.

A key consequence of this dysbiosis is increased intestinal permeability, or “leaky gut”. When the gut barrier is compromised, bacterial components like Lipopolysaccharides (LPS) can leak into the bloodstream. This triggers an inflammatory response throughout the body, a condition known as metabolic endotoxemia, which significantly contributes to insulin resistance.

Furthermore, the gut microbiome modulates metabolism through its own communication channels. Microbes produce metabolites, most notably Short-Chain Fatty Acids (SCFAs) such as butyrate. These SCFAs are crucial for maintaining gut barrier integrity and promoting insulin sensitivity. Dysbiosis, particularly a reduction in SCFA-producing bacteria, directly hinders these protective effects. The microbiome also influences host energy harvesting and central appetite signals, with certain microbial compositions being more efficient at extracting calories from food, contributing to weight gain.

## A new path forward

The intricate relationship between the PNEI axis, the gut microbiome, and metabolic health offers a compelling new perspective on the obesity epidemic. It suggests that simply addressing diet and exercise is insufficient without also considering the critical roles of psychological stress, inflammation, and gut health. This understanding paves the way for innovative, multi-targeted therapies that aim to restore balance to the entire system as illustrated in figure 1.

## PNEI Axis Model

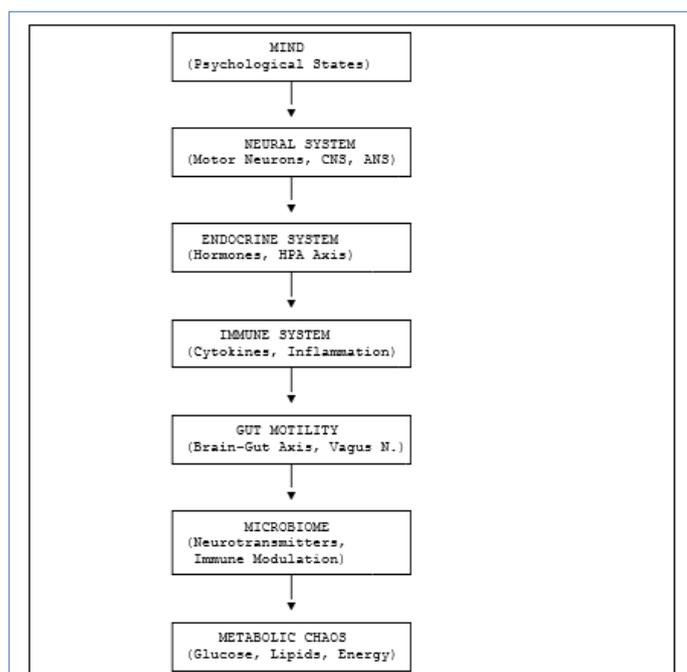


Figure 1: Difference between  $S_{Avg}$  and  $S_{max Avg}$  values at different distances from BTS antennas.

## Key

- **Mind** influences neural activity via stress, mood, and cognition.
- **Neural system** communicates with endocrine glands and immune cells.
- **Endocrine system** regulates hormones that affect immunity, motility, and metabolism.
- **Immune system** sends cytokine signals back to the brain and endocrine organs.
- **Gut motility** is regulated by neural, hormonal, and immune inputs.
- **Microbiome** modulates neurotransmitters, immune tone, and metabolic pathways.
- **Metabolic chaos** is the downstream effect of chronic dysregulation in the entire axis.

## The mind as the first messenger

Psychological states—whether fleeting anxiety or chronic depression—are not confined to the brain. Through the Hypothalamic–Pituitary–Adrenal (HPA) axis, emotional stress can trigger hormonal surges, alter neurotransmitter balance, and prime immune cells for either hyperactivity or suppression. This is why prolonged psychological strain can manifest as muscle weakness, inflammatory flare-ups, or even autoimmune disorders.

## Motor neurons and the body's wiring

Motor neurons, the final common pathway for voluntary movement, are exquisitely sensitive to the biochemical climate shaped by the PNEI axis. Chronic inflammation, oxidative stress, and hormonal imbalances can impair their function, contributing to conditions ranging from subtle coordination deficits to neurodegenerative diseases. The mind–motor connection is not just about motivation—it is about molecular cross-talk.

## Master immune–endocrine interplay

The immune and endocrine systems are not separate armies; they are co-commanders. Cytokines—immune signalling molecules—can influence cortisol release, while hormones like oestrogen and testosterone modulate immune cell activity. This bidirectional relationship means that a viral infection can alter mood and cognition, just as a hormonal imbalance can predispose someone to chronic inflammation.

## Motility and the gut–brain–immune triangle

Gut motility is a surprisingly sensitive barometer of PNEI health. The brain–gut axis, mediated by the vagus nerve, neurotransmitters, and immune signals, determines how efficiently the digestive tract moves. Stress-induced motility changes can lead to constipation, diarrhoea, or irritable bowel syndrome—conditions now understood to be as much neurological and immunological as they are gastrointestinal.

## Microbiome: The fifth player

The trillions of microbes in our gut are not passive passengers; they are active participants in the PNEI network. They produce neurotransmitters, modulate immune responses, and influence metabolic pathways. Dysbiosis—an imbalance in microbial populations—can amplify inflammation, disrupt hormonal rhythms, and even alter behaviour.

## Metabolic chaos: The final common pathway

When the PNEI axis is chronically dysregulated, the result is metabolic chaos—a state where blood sugar control, lipid metabolism, and energy balance spiral out of order. This is not just a by-product of poor diet or sedentary lifestyle; it is the cumulative effect of a stressed mind, inflamed neurons, misfiring hormones, and a disrupted microbiome.

**The PNEI axis is not a theory—it is the living proof that “mental health” and “physical health” are inseparable.**

**Potential interventions** could include:

- **Stress management techniques:** Practices such as mindfulness, meditation, and cognitive behavioural therapy can dampen HPA axis activity and reduce chronic inflammation.
- **Dietary interventions:** A diet rich in fibre and whole foods can promote a diverse and healthy gut microbiome, boosting the production of beneficial SCFAs.
- **Probiotics and prebiotics:** Supplementing with beneficial bacteria (probiotics) and the fibres that feed them (prebiotics) can help restore a healthy microbial balance.
- **Fecal microbiota transplantation (FMT):** For severe cases of dysbiosis, transferring a healthy donor’s gut microbiota has shown promise in improving insulin sensitivity.
- **Targeting neuroendocrine pathways:** Research into medications that modulate the PNEI axis and specific signalling molecules is ongoing.

**The future of managing obesity and metabolic syndrome** lies in an integrated approach. By embracing the PNEI paradigm, we can move beyond treating symptoms and begin to address the root causes of these complex, interconnected diseases. It is time for a medical and societal shift toward understanding the profound connection between our mind, our microbes, and our metabolic destiny.

### Why this matters now

In an era where chronic diseases are the leading cause of death, the PNEI framework offers a unifying lens. It urges clinicians to treat depression and diabetes, Parkinson’s and IBS, not as isolated pathologies but as interconnected expressions of a single, complex system. It also challenges public health to address stress, nutrition, and social determinants of health with equal urgency.

**The takeaway:** The PNEI axis is the body’s ultimate systems biology lesson. It tells us that healing the mind can heal the body, and vice versa—but only if we stop treating them as strangers.

### Conclusion

The Psycho-Neuro-Endocrine-Immune (PNEI) Axis is now unravelling the Mind–Body Web in the age of metabolic chaos. In the age of precision medicine, we are finally beginning to dismantle the old silos that kept psychiatry, neurology,

endocrinology, and immunology in separate rooms. The Psycho-Neuro-Endocrine-Immune (PNEI) axis is not just a scientific curiosity—it is a paradigm shift. It tells us that the mind is not an ethereal passenger in the body, but an active conductor in a symphony of hormones, neurons, immune cells, and even microbes. And when this orchestra falls out of tune, the result is not just “stress” or “illness,” but a cascade of dysfunctions—affecting everything from motor neurons to gut motility, from immune resilience to metabolic stability.

### Declarations

**Contributions:** Shailinder Jit Singh: Conceptualization, data curation, visualization, writing of the original draft, editing. Ramnik V Patel: Conceptualization, visualization, writing of the original draft, editing.

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