



Diet, lifestyle and preventing cancer

Practitioner viewpoints

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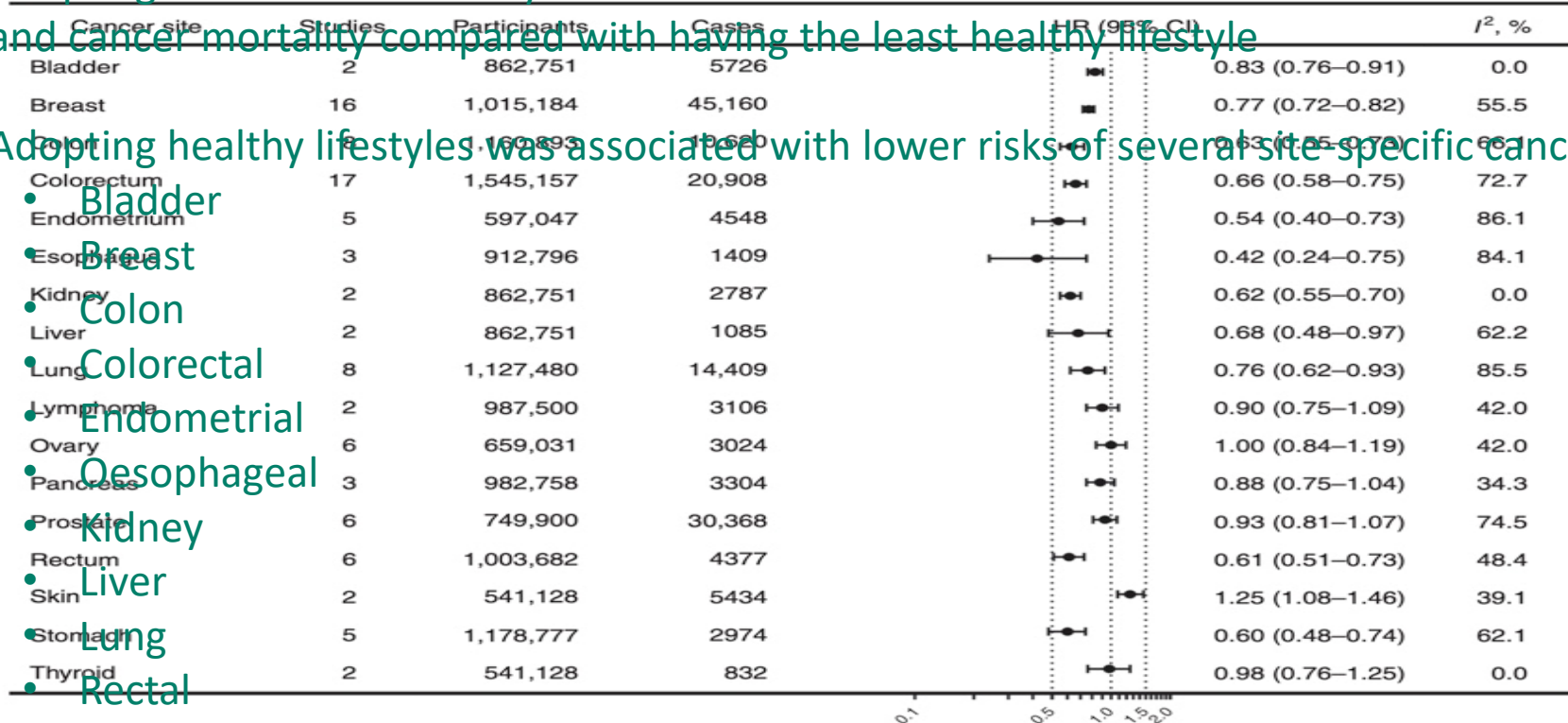
Surgical Oncologist

Board of Directors of ESSO (European Society of Surgical Oncology)

Evidence behind lifestyle and cancer

- Adopting the healthiest lifestyle was associated with a 29 and 52% lower risk of incident cancer and cancer mortality compared with having the least healthy lifestyle

- Adopting healthy lifestyles was associated with lower risks of several site-specific cancers:



- Bladder
- Breast
- Colon
- Colorectal
- Endometrial
- Oesophageal
- Kidney
- Liver
- Lung
- Rectal
- Gastric cancer

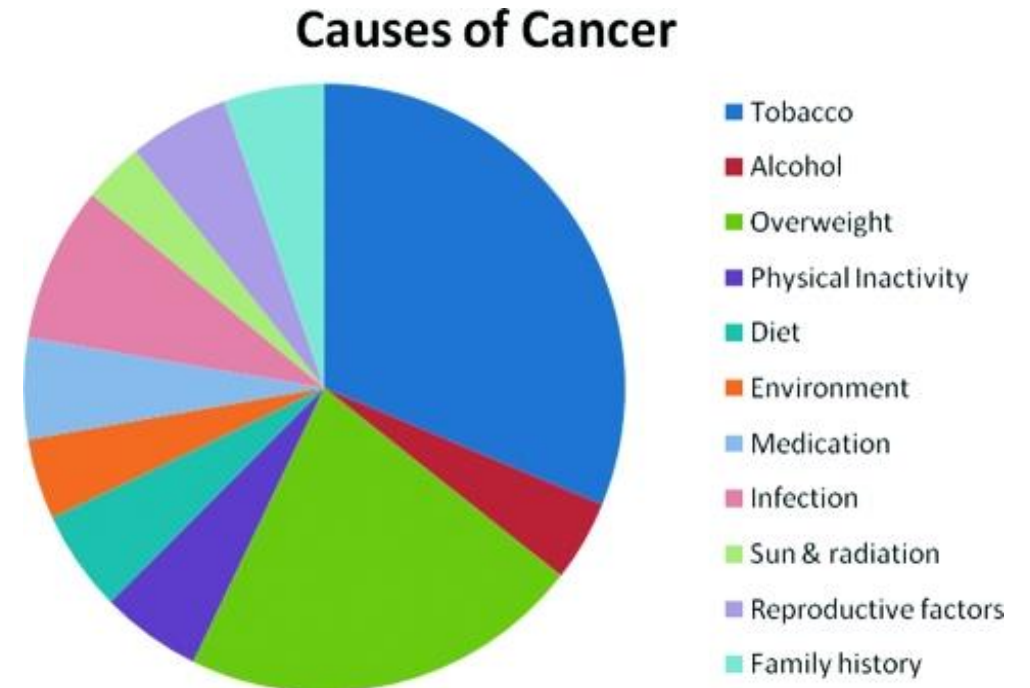
BJC
British Journal of Cancer

www.nature.com/bjc

ARTICLE
Epidemiology

Combined lifestyle factors, incident cancer, and cancer mortality: a systematic review and meta-analysis of prospective cohort studies

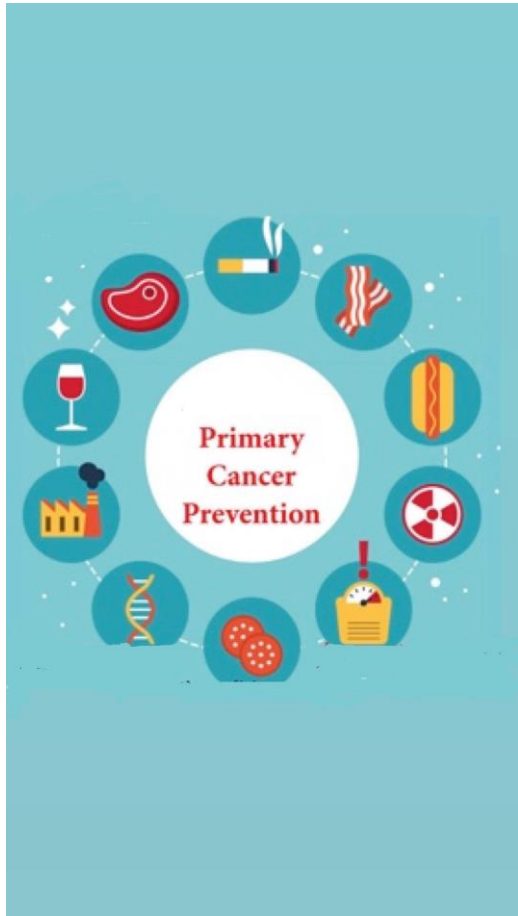
Cancer site	Overall classification of evidence	Magnitude of relative risk increase for BMI \geq 25 versus BMI < 25	Evidence for dose-response effect	Biologic plausibility
Colorectal	Strong	10–30%	Yes	Yes
Gastric cardia	Strong	20–80%	Yes	Yes
Esophagus	Strong	15–480%	Yes	Yes
Liver	Strong	50–80%	Yes	Yes
Postmenopausal breast	Strong	10–12%	Yes	Yes
Gallbladder	Strong	20–60%	Yes	Yes
Endometrial	Strong	50–710%	Yes	Yes
Renal/kidney	Strong	30–80%	Yes	Yes
Meningioma	Strong/Moderate	40–213%	Limited	Limited
Pancreatic	Strong	20–50%	Yes	Yes
Multiple myeloma	Strong/Moderate	15–52%	Limited	Limited
Ovarian	Moderate	10–20%	Yes	Yes
Thyroid	Moderate	4–17%	Yes	Yes



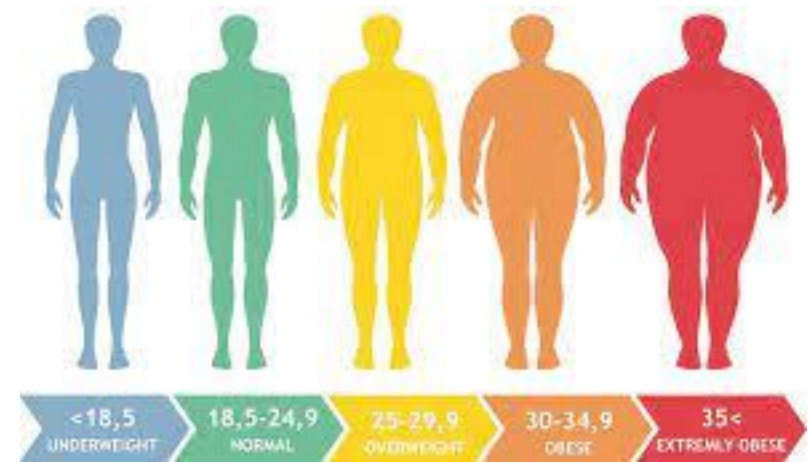
Physical activity, obesity and sedentary behavior in cancer etiology: epidemiologic evidence and biologic mechanisms

Christine M. Friedenreich ✉, Charlotte Ryder-Burbidge, Jessica McNeil

First published: 02 August 2020 | <https://doi.org/10.1002/1878-0261.12772> | Citations: 12



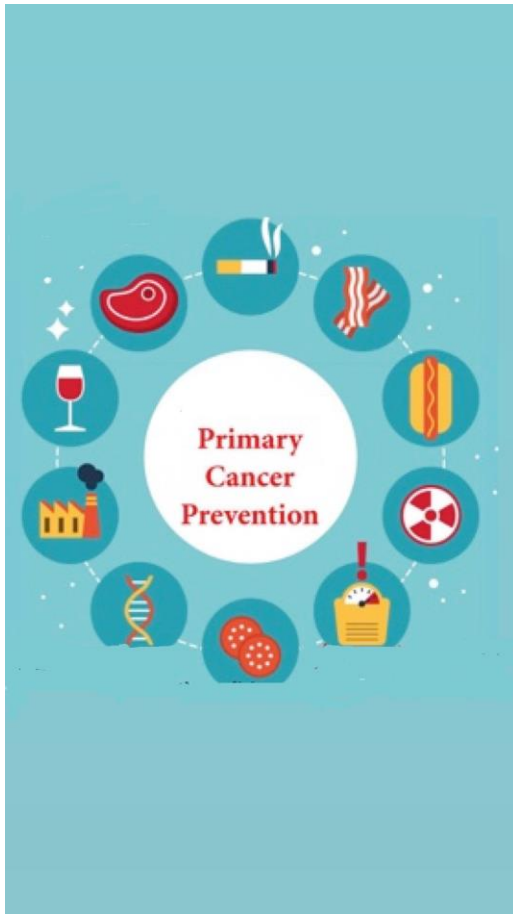
- Body weight: each five-unit increase in body mass index is associated with 5–50% higher risks of
 - Postmenopausal breast
 - Colon and rectal
 - Endometrial
 - Oesophageal
 - Gallbladder
 - Kidney
 - Liver
 - Ovarian
 - Pancreas
 - Stomach cardia
 - Thyroid cancer
 - Meningioma
 - Multiple myeloma



- **Obese men and women have 6 and 10% higher risks of cancer mortality**



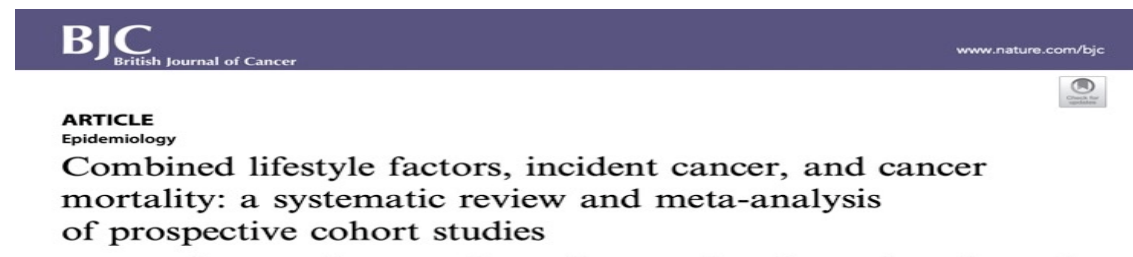
- For **physical activity and diet**, individuals in the highest group had
 - 9%-42% (physical activity) and 10% (diet) lower risks of cancer
 - 20 (physical activity) and 22% (diet) lower risks of cancer mortality



- There is a doseresponse association between **alcohol** consumption and cancer risk:
 - Drinking 50 and 100 g of ethanol per day → **22 and 91% higher risks** of incident cancer compared with abstainers
 - Heavy drinkers were associated with a 31% higher risk of cancer mortality compared with non-drinkers
- **Tobacco** smoking is the **most important risk factor** for cancer morbidity and mortality



- In conclusion...
 - Adopting healthy lifestyles is associated with lower risks of cancer morbidity and mortality
 - Creating an environment for better facilitating behaviour modifications should be a public health priority worldwide
 - The proportion of individuals having the healthiest lifestyles is low in many countries
 - Adopting the healthiest lifestyles was associated with a 30% lower risk of cancer mortality among cancer survivors
- No randomised controlled trials have provided evidence for the effects of multiple lifestyle interventions on cancer prevention and prognosis
- More studies are still needed for site specific cancers, and more evidence among cancer survivors and from populations in low- and middle-income countries is warranted





Primary Prevention Meeting



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