A word from Henry

Time relentlessly marches on! Sorry that we missed sending out our winter edition of the BreastWatch Times. On the positive side, the lack of a newsletter was due to my participation in a working group of the International Agency for Research on Cancer which met in Lyon, France during February 2001. This group gathered to discuss the world’s literature on the topic of Weight Control and Physical Activity in Cancer Prevention. I learned a great deal and came back to Denver with a new sense of urgency about starting a “Cuisine for Weight Control” program. I have discussed this with Dr. Sedlacek and with the Cuisine for Cancer Prevention Research team. All of us are excited about the potential for this program. On page 7 of our newsletter, we give a few details of the tentative outline of the program and ask for you to email or return the tear off interest sheet and send it via U.S. mail if you would have interest in participating in such a program. The target population for the intervention will be women at risk for breast cancer and breast cancer survivors.

A second issue that I would like to discuss relates to a recent publication in the Journal of the American Medical Association concerning the lack of a role of vegetables and fruit in breast cancer prevention (Smith-Warner, S, et al. Intake of fruits and vegetables and risk of breast cancer; a pooled analysis of cohort studies. Journal of the American Medical Association. 2001; 285,6; 769-776). A number of people with whom I have chatted have expressed concern about the article and the media attention that it received. Because many of my colleagues and I were also concerned about this, we recently sent out a letter to news agencies around the country. The letter was signed by over 50 scientists. I thought that you would be interested in the content of the letter which follows my comments (see page 2).

Finally, we have enclosed information on the Dietary Guidelines (pages 4-6). We judge that this information is very useful in structuring your personal dietary habits. The table containing information on botanical families of edible plants (page 8) should give you ideas about how to increase the diversity of your diets.

We wish you the best and hope that you find the content of this newsletter of value.
The following letter is from scientists (including Henry Thompson) sent to news media all over the country expressing concern about recent publications regarding vegetables and fruit.

“Dear Media Representative:

Over the past year, three different scientific studies have failed to find a link between consumption of vegetables and fruits and reduced risk for certain cancers. These results received a great deal of media attention. Each study was a significant, well designed contribution to our scientific knowledge, but each possessed necessary limitations in size and scope. **As a result, none of these studies determined how diets high in vegetables and fruits (five to nine servings/day), consumed over an extended period of time (more than four years), affect cancer risk.**

All studies are limited by their design. Intervention studies, for example, which require subjects to change their diets, must be of limited duration. Yet we know cancer to be a disease that develops slowly, over the course of many years and even decades.

So when it comes to evaluating the effects of diet over longer periods, scientists must turn to other methods of investigation such as cohort studies, which track – but do not change – the reported diets of subjects over several years. Such studies, however, can only evaluate the effect of diets “high in vegetables and fruits” if they find significantly large numbers of subjects who actually eat five to nine servings of these foods each day.

Of the three studies in question, one was an intervention study, one a cohort study and one an analysis of nine previous cohort studies. All bear the limitations of their kind. As such, they add to the wealth of data on the diet-cancer link that has been building for decades, but cannot and do not single-handedly overturn it.

To date, well over 200 studies have revealed a strong association between diets high in vegetables and fruits (five to nine servings/day) and lower risk for cancer. It is not simply the number of these studies that argues so strongly for the cancer-protective potential of diets rich in these foods. Of equal importance is the fact that so many studies came to this same conclusion using different methods of investigation.

Scientific investigation is an ongoing process. More studies on diet and cancer will be reported to the public. When it comes to something as important as personal health, the public should always look to the preponderance of scientific evidence, not simply the latest study. Evidence that has been building for decades swings heavily in favor of a long-term diet high in vegetables and fruits for reducing risk for cancer, as well as heart disease, diabetes and obesity.

### Judy’s Original Oriental Fruit Salad

- 4 cups fresh greens of your choice, torn into bite size pieces (Iceberg, Endive, Raddichio, Bok Choy, etc.)
- 1 carrot, grated
- 1/2 cup grated red cabbage
- 1 large can pineapple chunks, drained
- 1 large can mandarin oranges, drained
- 1 small can sliced water chestnuts, drained
- 1 small can bamboo shoots, drained
- 1/2 cup sliced almonds, or to taste
- 1/2 cup crisp Chinese noodles, or to taste

Mix all together except last two ingredients; refrigerate until time to serve. Toss in the nuts and noodles just before serving. Serve with honey mustard dressing or dressing of your choice.

### Black-Eyed Peas, Corn and Sweet Potato Salad

The preparation of this salad is very quick and easy, but does require an hour of chilling time before serving.

- 2 cups diced, unpeeled sweet potatoes
- 2 Tbs. Vegetable oil
- 2 Tbs. Red wine vinegar
- 3 Tbs. Minced fresh parsley (1 1/2 Tbs. Dried)
- 1 tsp. Dijon mustard
- 1/2 tsp. black pepper
- 1/4 tsp. salt
- 2-16 oz cans black-eyed peas, drained
- 1 1/2 cups cooked, fresh, or thawed frozen corn
- 2 green onions finely chopped.
For this issue’s research update, we would like to give you a glimpse of what it is like to be a participant in our Challenge Cuisine Program. The following article was written by Laura Hoeppner who participated in our Challenge Cuisine I, which took place from September 16, 2000 through November 17, 2000. We asked Laura to share her thoughts about her “challenge experience”. THANK YOU LAURA!

Sometimes we do something for one set of reasons, and come away from it realizing that there were other reasons for doing it we couldn’t have imagined.

I wanted to join the Cuisine for Cancer Prevention Study because I’m a big believer in moving science forward, in this case nutritional science. I feel an obligation to step up in the search for nutritional answers in the fight against cancer. Having battled breast cancer myself, and watched many family members deal with cancer and heart disease, I feel a duty to volunteer in many different ways so that my children won’t face the same challenges. How noble of me.

As it turned out, nobility doesn’t go very far when it means the elimination of most high fat, high sugar treats. I did more whining on the Cuisine program than I did during 2 drug-free births, 12 weeks of chemo, 2 surgeries and 5 weeks of radiation.

Who knew that it would be so difficult to follow the strict discipline of a nutritional study? Who knew that I would actually find the strength to bypass bowls of M & Ms, plates of cookies, and, hardest of all, Halloween candy everywhere I turned, all in the name of science? But I did it, and that’s one of the amazing lessons I learned through this program. It taught me about my relationship with food, about the difference between need and want, and about what I must change about my diet.

During the first week of the program I spent about 2 days having anxiety attacks. I was shaky, panicky, and couldn’t imagine why. I wasn’t emotionally attached to food. That was my sister’s issue, my mother’s problem, not mine! Well, after a glass of wine (that’s allowed on the program) and a hard confrontation with reality, I began to understand that the control that I exercised (or didn’t exercise) over my eating habits was an important strategy in my life.

I was placed in a group that spent 2 weeks eating a diet based on the food pyramid, 4 weeks on a high-grain diet, and 2 weeks on a high-fruits and vegetables diet. The biggest adjustment, after the initial shock of starting the program, was switching from the high-grains to high-fruits and vegetables diet. While on the grains diet I found myself desperately craving more fruits and vegetables. What I would give for a grape, an apple or a tomato! How I missed nuts and raisins! But after I switched to the fruits and veggies diet, I learned just how satisfying those grains had been! Fruits and vegetables were tastier, but they often left me feeling hungry and unsatisfied. Now I wanted a bagel, or a granola bar! I’ve developed a whole new appreciation for whole-wheat couscous!

And then came the adjustment to life off of the program. The freedom was almost overwhelming. I began to learn just how much gluttonous freedom I had exercised most of my life. Unlike most of the people in the world, and unlike many people in America, until I went on the study I had eaten whatever I wanted, whenever I wanted, with little regard for calories, portion size, variety, or availability. This fact had never been so apparent as it was when what I could consume was strictly limited. I can’t imagine what it is like for a person coming to the United States from a country where food isn’t so plentiful. After completing the study I found supermarkets were suddenly like an amusement park with too much to look at, too much to take in, too many choices to make! I could now stop at any fast food place and eat to my heart’s delight (and my stomach’s agony!) After about a week of being overwhelmed, and sometimes overeating, I found a new coping mechanism for blending “normal” life with the healthy eating I had learned in the Cuisine study.
Get to know your Botanical Families, continued....

<table>
<thead>
<tr>
<th>Leguminosae</th>
<th>Rutaceae</th>
<th>Umbelliferae</th>
<th>Chenopodiacea</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alfalfa Sprouts</td>
<td>Curry leaf</td>
<td>Carrots</td>
<td>Beets</td>
</tr>
<tr>
<td>Beans:</td>
<td>Grapefruit</td>
<td>Celery</td>
<td>Beet greens</td>
</tr>
<tr>
<td>Broad</td>
<td>Kumquat</td>
<td>Chervil</td>
<td>Orach</td>
</tr>
<tr>
<td>Cranberry</td>
<td>Lemon</td>
<td>Coriander</td>
<td>Spinach</td>
</tr>
<tr>
<td>Fava</td>
<td>Lime</td>
<td>Dill</td>
<td>Swiss chard</td>
</tr>
<tr>
<td>Garbanzo</td>
<td></td>
<td>Fennel</td>
<td></td>
</tr>
<tr>
<td>Green</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kidney</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lima</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mung</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Navy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Northern</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pinto</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Questions, Comments, Suggestions....

If you have any questions, comments or suggestions regarding this publication, please contact Becky Meinecke at 303-242-3421 or by email at meineckeb@amc.org

If you are interested in supporting Breast Cancer Prevention research...

Donations towards our research activities would be welcome. Please send a check made payable to:

AMC Cancer Research Center,

This newsletter is brought to you by the Cuisine for Cancer Prevention Research Team:

Dr. Henry Thompson
Dr. Scot Sedlacek
Dr. Jerianne Heimendinger
Ann Diker
Q AND A'S ON THE DIETARY GUIDELINES FOR AMERICANS, 2000

What are the Dietary Guidelines for Americans?

The Dietary Guidelines are 10 basic principles for healthy eating, grouped under an ABC scheme—Aim for fitness, Build a healthy base, and Choose sensibly...for good health. The guidelines under each group are:

**Aim for fitness:**
Aim for a healthy weight. Be physically active each day.

**Build a healthy base:**
Let the Pyramid guide your food choices. Choose a variety of grains daily, especially whole grains. Choose a variety of fruits and vegetables daily. Keep food safe to eat.

**Choose sensibly:**
Choose a diet that is low in saturated fat and cholesterol and moderate in total fat. Choose beverages and foods to moderate your intake of sugars. Choose and prepare foods with less salt. If you drink alcoholic beverages, do so in moderation.

Why are the Dietary Guidelines important?

- They serve as the cornerstone of Federal nutrition policy.
- They provide sound advice to help people make food choices for a healthy, active life.
- They reflect a consensus of the most current science and medical knowledge available.

Why do the Guidelines change?

- The science base supporting the Dietary Guidelines is constantly changing. New scientific research, increased consensus among authorities on specific diet and health issues necessitated changes to the 1995 edition.

Do the Dietary Guidelines make specific quantitative recommendations for nutrients and other food components?

- Yes, in those cases where the scientific evidence is strong enough to support a quantitative recommendation. Since 1990, the Guidelines have recommended that no more than 30% of total calories come from fat, and that less than 10% of calories come from saturated fat.
- For sodium and cholesterol, the Guidelines do not make a specific quantitative recommendation but refer readers to the Daily Values used on Nutrition Facts labels as a guide to recommend intake levels.
- For nutrients and food components for which there is not enough scientific evidence to make a quantitative recommendation, the Guidelines provide directional guidance, e.g. “Choose a variety of grains daily, especially whole grains” and “Choose beverages and foods to moderate your intake of sugars.”

Do the Dietary Guidelines apply to children?

- Yes, the Dietary Guidelines apply to healthy Americans two years of age and older.
- Where appropriate, the Dietary Guidelines give more specific advise for children and adolescents. For example, the Guidelines discuss ways to improve calcium and iron intakes in children and teenagers. Also, they include sections with specific advice related to children, including encouraging healthy weight and increasing physical activity in children, in order to focus attention on the growing problem of childhood obesity.
What's new about the 2000 edition of the Dietary Guidelines bulletin?

The emphasis on certain topics has changed to reflect emerging science and to be consistent with diet and health messages from other Federal agencies. For example:

- The fat guideline was reworded to place increased emphasis on the need to reduce the consumption of saturated fat because of its association with heart disease. The recommendation for limiting total fat was changed from “low in fat” to “moderate in total fat.” The upper limit on total fat intake remains at 30%, as in previous editions of the Guidelines. The role of trans fatty acids in raising blood cholesterol is also recognized.

- The weight guideline was reworded to “Aim for a healthy weight” because of the overwhelming scientific evidence about the health risks of overweight and obesity. This guideline is consistent with guidance about obesity from the National Institutes of Health, National Heart, Lung and Blood Institute and the National Institute of Diabetes, Digestive and Kidney Diseases.

- The order of the guidelines was changed to emphasize healthy weight and physical activity and a separate guideline on activity was included, “Be physically active each day.” The physical activity guideline is consistent with guidance in the Surgeon General’s Report on Physical Activity.

- In recognition of growing concerns about foodborne illness, a new guideline on consumer food safety was added, “Keep food safe to eat.” Keeping food safe is a critical element in ensuring that consumers know what and how to eat to stay healthy.

Other changes in the Guidelines were made in an attempt to make the messages more practical and actionable. For example:

- The 1995 fruits, vegetables and grains guideline was separated into two guidelines because of differences in the food groups, and the text was made more actionable: (e.g. “Eat a variety of grains daily, especially whole grains” and “Eat a variety of fruits and vegetables daily”). Expanded emphasis was placed on plant foods as an important foundation of healthful eating.

- The Guideline “Eat a variety of foods,” was replaced with “Let the Pyramid guide your food choices.”

- The sodium guideline was reworded from “Choose a diet moderate in salt and sodium” to “Choose and prepare foods with less salt” to focus on actions consumers can take that will result in a diet moderate in sodium. The word “sodium” was removed from the title, and difference between sodium and salt was clarified in the text.

- The sugar guideline was reworded from “Choose a diet moderate in sugars” to “Choose beverages and foods to moderate your intake of sugars” to focus on major sources of sugars in the American diet.

Why did the guidelines focus on three (ABC's) major messages: Aim for fitness; Build a healthy base; Choose sensibly?

- Numerous studies indicate that consumers want messages that are simple, memorable, and meaningful. The ABC’s for good health group the guidelines into 3 categories to help consumers remember them and follow their suggestions for changing dietary behavior.

Why was the guideline to eat a variety of foods changed in the 2000 edition of the Dietary Guidelines?
The Challenge Cuisine is designed to study the longer term effects of eating a healthy diet low in fat and high or low in vegetables and fruit. This diet will help participants learn how to adapt healthy eating patterns into their daily routine.

This study is an 8 week program in which participants will either be assigned to a reduced fat, high vegetable and fruit group, or a reduced fat, low vegetable and fruit group, which is high in grains.

To make the 8 week program easier to follow and more convenient for participants, we will be working with Wild Oats Markets (1111 S. Washington, Denver), who will be providing approximately 1 meal per day.

We will also allow participants to eat 2 free meals a week in which they can eat what they choose. We have also designed a new cookbook which allows exchanges and more freedom for the participants.

Participants will be asked to purchase, prepare, measure, and eat food that is not provided by Wild Oats. Participants will also be required to attend 5 meetings on Saturday mornings for blood and urine collection as well as discussion and support.

The dates for The Challenge Cuisine meetings are:

- Sept. 15
- Oct. 6
- Nov. 3
- Nov. 17
- Oct. 20

Cuisine for Weight Loss

Are you interested in getting back to the weight you were when you were a young adult? Or have you never had a body weight that you consider ideal for your height? If you answer yes to either of these questions and are interested in learning more about a program of research that we are developing, then please read further.

We are in the process of formulating a program that would assist individuals in reducing and maintaining their body weight at a desirable level for long periods of time. We anticipate that the program would require a sincere commitment to maintain body weight at a level that is considered to be “ideal” relative to height for a period of at least one year. It also is likely that individuals would be required to follow prescribed diets for the extended periods of time and that there would be regularly scheduled meetings at which attendance would be required.

If you would like to receive information about the program when it is announced, please email us at meineckeb@amc.org, or return the bottom portion of this page to AMC Cancer Research Center, Attn: Becky Meinecke, 1600 Pierce St. Lakewood, CO 80214. Information will be sent as soon as the program is developed.

YES! I am interested in receiving information on the Cuisine for Weight Loss Program.

Please send information to:

Name:________________________________________________________

Mailing Address: _____________________________________________

____________________________________________________________

____________________________________________________________

Phone:_______________________________