

# [Eating behaviors that (increase,decrease) cancer risk](https://assignbuster.com/eating-behaviors-that-increasedecrease-cancer-risk/)

[Health & Medicine](https://assignbuster.com/essay-subjects/health-n-medicine/)

Eating Behaviors that (Increase, Decrease) Cancer Risk It has been determined by The World Health Organization that dietary factors explain at leastthirty percent of all types of cancers that have been diagnosed in Western countries while twenty percent of those diagnosed in the developing countries. While finding a linkage between cancer and diet, the cancer researchers were able to find an interesting linkage between consumption of meat and the incidence of cancer. It was observed that cancer was much less probable to develop amongst individuals who avoided meat. Extensive researches in Germany and England depicted that vegetarians were around forty percent less probable to develop cancer in comparison to those who eat meat (Frentzel-Beyme and Chang-Claude, 1993). Within the US, Seventh-day Adventists, which is a religious group that is noticeable because although almost all of its member avoid alcohol and tobacco and practice normally healthy lifestyles, fifty percent of the whole group members are vegetarian, while fifty percent consumes modest quantities of meat. This group permitted the researchers to separate the impacts of consuming meat from other contributors. By and large, noticeable reductions in risk of cancer were depicted by these researches amongst the fraction of the group that was vegetarian (Nicholson, Barnard & Howard, 1995). In contrast, it was shown by the Harvard researcher that people who consume meat on daily basis are around three times more prone to risk of colon cancer when compared with those people who consumed meat on rare occasions. In the second review of the main researches on nutrition, food and cancer prevention published by the AICR (American Institute for Cancer Research) in 2007, it was ascertained that for cancers of lung, esophagus, stomach, pancreas, endometrium , prostate and colorectal, red meat (pork, lamb or beef) and processed meat intake possibly heightened cancer risk. A review of literature ascertained that for colorectal cancer, there is a compelling scientific proof that red meat raised cancer risk and that saturated/ animal fat, processed meat, and extensively cooked meat were also attributed to increased risk (World Cancer Research Fund, 2007). Considering breast cancer, nations with higher consumption of fat, specifically fat that is extracted from animal products like dairy products and meat depict a raised occurrence of breast cancer (Boyar, Rose and Wynder, 1986). For instance, in Japan, the conventional diet is much lesser in fat, specifically animal fat, in comparison to the usual western diet and therefore the rate of occurrence of breast cancer is also low. In the last years of 1940s, in Japan, when there were rare occurrence of breast cancer, lower than ten percent of the energy in their diet was attributed from fat (Hamazaki et al., 1990). The normal American diet is focused on animal products, which contains a larger proportion of fats and lesser portion of other essential nutrients, with around thirty to thirty five percent of energy attributed from fats. It was observed that when such a western diet was introduced amongst Japanese girl, the incidence of breast cancer enhanced dramatically. Within Japan, even, the wealthy women who consume meat on daily basis are 8. 5 times more susceptible to the breast cancer risk than those who are not able to afford meat and therefore consume either much lesser amounts or don’t consume at all (Hirayama, 1978). One of the suggested reasons for fats to be responsible in promoting cancer includes their ability to enhance the hormones that encourage cancer. The intake of high-fat foods like dairy products, fried foods, meat and even vegetable oils induces a woman’s body to build more estrogens, which promote growth of cancer cells in the different organs including breasts that are prone to estrogens. Therefore, it can be said that elimination of fatty foods from diet for the whole life lowers the hormone-induced cancer risk. Repeated intake of meat, in particular red meat, is linked with an enhanced risk of cancer of colon (Fraser and Singh, 1998; Rimm et al., 1994). Saturated fat and total fat, which have a propensity to be considerably greater in animal products than in food derived from plants, and refined sugar, are found to be associated with increasing the risk of colon cancer. In United States, one of the most commonly occurring cancers amongst men is prostate cancer and numerous dietary factors have been found to be linked with the risk of prostate cancer. Among these, saturated fat, dietary fat, meat and dairy products are found to be increasing the risk of prostate cancer while intake of carotenoids and other fiber, fruit and antioxidants have been found to be decreasing the risk of prostate cancer. The reason attributed in this case is similar to that of breast cancer. Since these dietary fats are found to be linked with increasing testosterone production this as a consequence heightens the risk of prostate cancer (Hennekens, et al., 1994). It has been suggested that a diet that contains lesser quantities of fats, dairy, red meat and calcium while more vegetables and fruits may be beneficial in lowering the risk of prostate cancer as well as it may be beneficial in its treatment. Intake of charcoaled meats, fats, highly processed meat and dairy products are found to be associated with prostate cancer. (Chapman and Ma, 2009). References Boyar, A. P., Rose, D. P., and Wynder, E. L. (1986). International comparisons of mortality rates for cancer of the breast, ovary, prostate, and colon, and per capita food consumption. Cancer, 58, 2363-2371. Chapman, K. and Ma, R. W. (2009). A systematic review of the effect of diet in prostate cancer prevention and treatment. J Hum Nutr Diet. 22(3), 187-189. Fraser, G. E., and Singh, P. N. (1998). Dietary risk factors for colon cancer in a low-risk population. Am J Epidemiol. 148(8), 761-74. Frentzel-Beyme, R., and Chang-Claude, J. (1993). 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