**Research Highlights**

**American Association for Cancer Research Second Annual Conference on Frontiers in Cancer Prevention Research**

*Phoenix, AZ October 26–30, 2003*

**Epidemiologic Research**

**Aspirin May Increase the Risk of Pancreatic Cancer**

The longest-running major women’s health study is the Nurses’ Health Study that was initiated in 1976 and involved 88,378 women who initially were cancer free. Researchers from Harvard University Medical School in Boston, MA, presented the results of an analysis of these data examining the relationship between aspirin use and pancreatic cancer risk. During the 18 years of follow-up, 161 cases of pancreatic cancer were documented. Aspirin use was assessed biennially from 1980. For women who reported taking two or more aspirin tablets per week for 20 or more years, the risk of pancreatic cancer relative to those who did not take aspirin was increased by 58%. Consistent aspirin users, defined as those who reported aspirin use on at least two of three consecutive biennial questionnaires and were taking 14 or more aspirin tablets per week, had nearly an 86% increased risk of developing pancreatic cancer. Those taking 6–13 tablets per week had a 41% increased risk for pancreatic cancer. The researchers suggested that women need to consult with their healthcare providers regarding aspirin use. Extended aspirin use may increase the risk of pancreatic cancer significantly in women.

**Lower Levels of Dense Breast Tissue Are Associated With Higher Physical Activity**

Dense breast tissue is associated with an increased risk of breast cancer. Data from the Health, Eating, Activity, and Lifestyle Study indicate that lower amounts of dense breast tissue are associated with higher physical activity levels, suggesting a link between physical activity and breast cancer risk. Researchers from Yale University in New Haven, CT, examined data collected from 1,223 women on physical activity, diet, weight, hormones, breast density, and other factors that affect breast cancer prognosis among newly diagnosed patients with breast cancer. Physical activity and breast density data were obtained from information and mammograms from the year prior to diagnosis. The analysis demonstrated a statistically significant 17% difference in breast tissue density comparing the least active and most active premenopausal women with body mass index (BMI) scores less than 30. Postmenopausal women or those with BMI scores greater than 30 did not show this association. The authors concluded that this study provides evidence of the benefit of regular exercise and could be used to motivate women to be more physically active.

**Clinical Research**

**Weight Loss May Lower the Risk of Breast Cancer**

Researchers from South Manchester University Hospitals in the United Kingdom presented the results of a trial of diet regimens for women with a family history of breast cancer. A total of 79 women who had gained significant amounts of weight as adults were enrolled in the study. The women were assigned to either a calorie-restricted and exercise weight-loss program or a standard diet with only exercise advice. Biomarkers for breast cancer risk were measured across both groups. The researchers measured body weight, waist circumference, percentage of body fat, total subcutaneous and intra-abdominal fat, insulin, testosterone, and sex hormone binding globulin (which affects estrogen levels). The data were analyzed to evaluate the effects of losing more than 5% or 0%–5% of body weight. According to the scientists, the data indicated that a positive benefit existed in terms of levels of biomarkers for breast cancer risk for the women in the study who lost 5% or more of their body weight.

**Lower Breast Cancer Risk Is Associated With Intake of Fruits and Vegetables**

Researchers from the School of Medicine at Oregon Health and Science University in Portland presented results from a study that suggest that women who consume fruits and vegetables daily may have significantly lower breast cancer risk. In this study, the dietary habits of 378 women in Shanghai, China, who had been diagnosed with breast cancer were compared with those of 1,070 age-matched women who did not have breast cancer. An in-depth food frequency questionnaire that recorded factors such as food groups and caloric intake was used to assess dietary intake. The consumption of four or more servings of fruits and vegetables per day was associated with reduced breast cancer risk. No association existed between the intake of soy or soy products and breast cancer risk. The researchers concluded that this study reinforces the importance of fruits and vegetables for disease prevention.

**Green Tea Polyphenols May Protect Against Liver Cancer in High-Risk Patients**

DNA damage by oxygen free radicals is associated with tumor formation. Urinary 8-OHdG can be used as a measure of this damage. Green tea polyphenols (GTP) inhibit a variety of tumors in model systems, including liver tumors. Researchers from Texas Tech University in Lubbock investigated the effect of GTP on liver cancer biomarkers and urinary 8-OHdG. In their study, 124 people aged 20–55 with positive reactions for hepatitis-B surface antigen and aflatoxin, a poisonous substance produced by mold, were assigned randomly to three groups. Group 1 received low-dose GTP (500 mg, n = 42), group 2 received high-dose GTP (1,000 mg, n = 41), and group 3 served as the control, receiving a placebo (n = 41). Urine samples were collected at baseline, one month, and three months to assess urinary 8-OHdG and GTP biomarkers. Blood and urine samples were collected at baseline, one month, and three months to assess aflatoxin biomarkers. Baseline GTP biomarkers were similar in all three groups. At one and three months, urinary GTP biomarkers were elevated significantly in both treatment groups compared to the control group. In addition, urinary 8-OHdG and the aflatoxin biomarkers were greatly reduced in the GTP-treated groups at three months compared to the control group. The results suggest that GTP may play a role in liver cancer prevention.

**Mention of specific products and opinions related to those products do not indicate or imply endorsement by the Oncology Nursing Forum or the Oncology Nursing Society.**

Digital Object Identifier: 10.1188/04.ONF.173-174