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## **French National Cancer Institute report 2015 “ Nutrition and primary cancer prevention: updating scientific data ”**

Paule Latino Martel, Vanessa Cottet, Nathalie Druesne Pecollo, Fabrice H.F. Pierre, Marina Touillaud, Mathilde Touvier, Marie-Paule Vasson, Julie Le Merdy, Raphaëlle Ancellin

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# French National Cancer Institute report (2015)

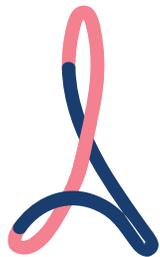
## “Nutrition and primary cancer prevention: updating the evidence”

Latino-Martel P, Cottet V, Druesne-Pecollo N, Pierre F, Touillaud M, Touvier M, Vasson MP, Le Merdy J, Ancellin R

RF3-8

Track 1

Abstract presented before to the international community: No  
Disclosure of interest: none



Paris, France  
31 Oct – 3 Nov 2016

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# Process and deliverables



- WCRF/AICR: main report (2007), continuous project reports (2010-2017)
- New studies => reassessment of the level of evidence (3<sup>rd</sup> Cancer Plan 2014-2019)
- Coordination by the French National Cancer Institute (INCa)
- Experts from the NACRe network (cf. EPP45-4)
- 10 nutritional factors considered as relevant for France (developed countries)
- Search for meta-analyses, pooled analyses and intervention trials, published between January 2006 and February 2014, after the most recent WCRF/AICR reports

**Synthesis**  
Dissemination: 4500  
Downloading: 3500

**NUTRITION ET PRÉVENTION PRIMAIRE DES CANCERS : ACTUALISATION DES DONNÉES**

Expert report

**Dissemination: 50 000**  
**Downloading: 12 000**

**NUTRITION & CANCERS**  
Alimentation, consommation d'alcool, activité physique et poids.

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journal homepage: [www.elsevier.com/locate/critrevonc](http://www.elsevier.com/locate/critrevonc)

Review

**Alcoholic beverages, obesity, physical activity and other nutritional factors, and cancer risk: A review of the evidence**

Paule Latino-Martel<sup>a,b,\*</sup>, Vanessa Cottet<sup>b,c</sup>, Nathalie Druesne-Pecollo<sup>a,b</sup>, Fabrice H.F. Pierre<sup>b,d</sup>, Marina Touillaud<sup>b,e</sup>, Mathilde Touvier<sup>a,b</sup>, Marie-Paule Vasson<sup>b,f</sup>, Mélanie Deschasaux<sup>a,b</sup>, Julie Le Merdy<sup>a,b</sup>, Emilie Barrandon<sup>a,b</sup>, Raphaëlle Ancellin<sup>g</sup>

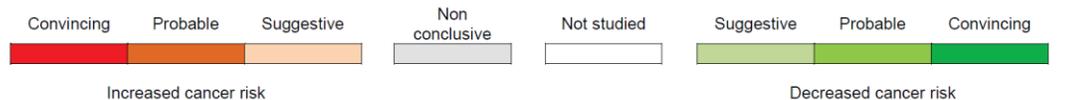
<sup>a</sup> Sorbonne Paris Cité Epidemiology and Statistics Research Centre (CRESS), Inserm U1153, Inra U1125, Cnam, Paris 13 University, Nutrition Research Team (EREN), Bobigny, France  
<sup>b</sup> French Network on Nutrition and Cancer Research (NACRe Network), France<sup>1</sup>  
<sup>c</sup> University Hospital of Dijon, Inserm U866, Digestive Cancer Registry of Burgundy, University of Burgundy, Dijon, France  
<sup>d</sup> UMR 1331 Toxalim, Inra, INP, UPS, Team 9 "Prevention, Promotion of Carcinogenesis by Food", Toulouse, France  
<sup>e</sup> Cancer and Environment Department, Léon-Bérard Cancer Centre, Lyon, France  
<sup>f</sup> Clermont Université, Université d'Auvergne, UFR Pharmacie; Inra, UMR 1019, CRNH Auvergne: Centre Jean-Perrin, CHU de Clermont-Ferrand, France  
<sup>g</sup> French National Cancer Institute, Department of Prevention, Boulogne-Billancourt, France

International review

# Results: Levels of evidence between nutritional factors and cancer risk

- More than 150 relationships evaluated
- In most cases, previous WCRF/AICR evaluations are confirmed
- New levels of evidence
  - \*Newly evaluated:
    - example: excess bodyweight and hematological malignancies
  - \*\*Revised:
    - example: fiber and breast cancer

	Solid tumors																Hematological malignancies											
	Nasopharynx	Head and neck	Mouth (oral cavity), pharynx, larynx	Oesophagus	Oesophageal and gastric junction adenocarcinoma	Stomach	Small intestine	Colon and rectum	Pancreas	Ampulla of Vater	Liver	Gallbladder	Kidney	Bladder	Breast (premenopause)	Breast (postmenopause)	Endometrium	Cervix	Ovary	Prostate	Testis	Lung	Thyroid	Skin	Hodgkin lymphoma	Non-Hodgkin lymphoma	Leukaemia	Multiple myeloma
Alcoholic beverages							*	Men Women		*			**										*		*			
Overweight, obesity					*Proximal Distal					**									**Advanced Localised		*	**	*		*	*	*	*
Red meat			**									*	*	*	*				*									
Processed meat			**									*	*	*	*				**		**							
Salt, salted foods																												
Beta-carotene supplements	*	*	*		+			*				*	*				*	**		**		+		*	*			
Physical activity		*					Colon Rectum							**	**						**	*			*			
Fruits																												
Vegetables (non starchy)																												
Dietary fiber														**	**													
Dairy products							*						*	**	**													
Breastfeeding				*																								



\*Supplements containing high doses of beta-carotene, notably for smokers and asbestos-exposed subjects

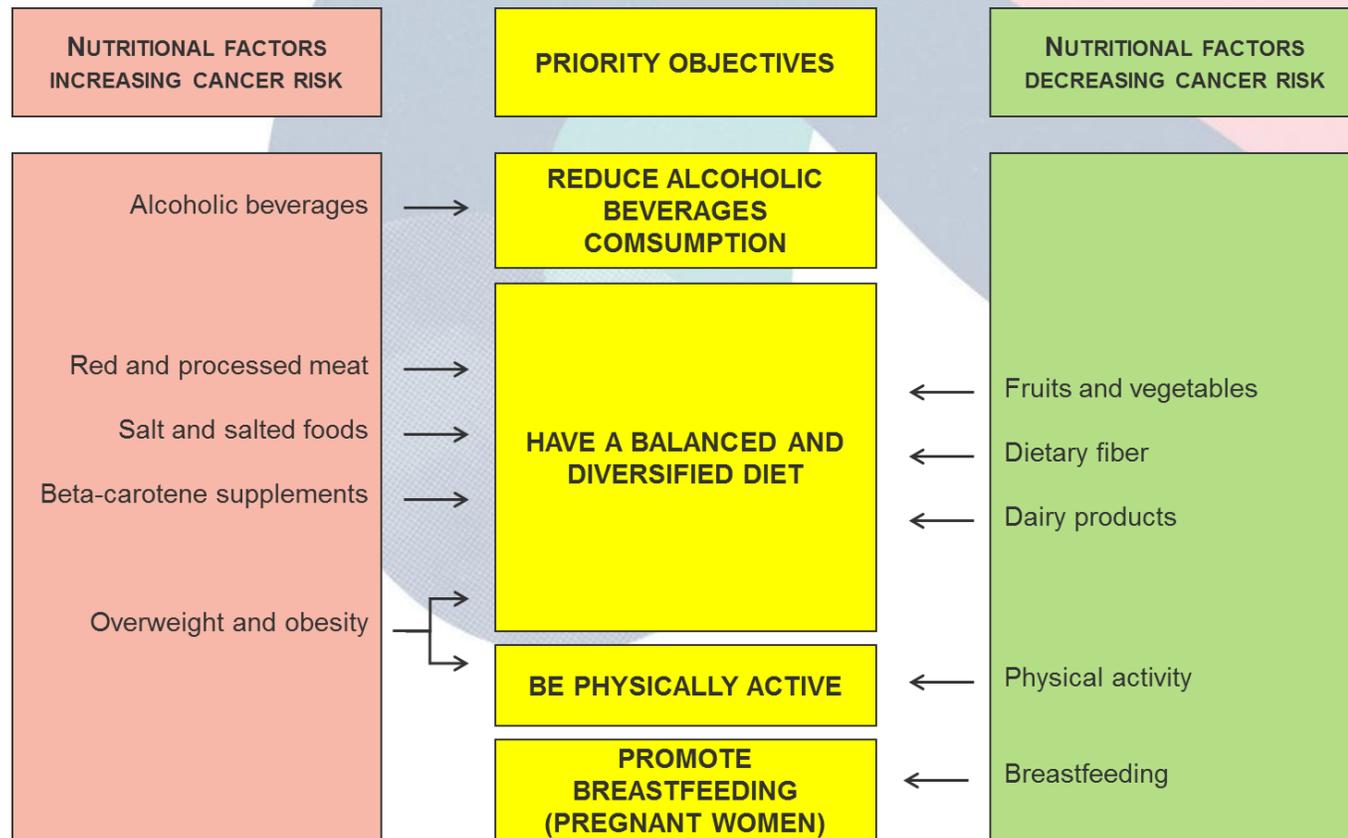
# From nutritional factors to priority objectives

Convincing or probable level of evidence,  
as updated by the INCa expert group



Translation in priority objectives

Nutritional factors increasing cancer risk	Cancer sites	Nutritional factors reducing cancer risk	Cancer sites
Alcoholic beverages	Mouth Pharynx Larynx Esophagus Colon and rectum Liver Breast	Physical activity	Colon Lung Breast Endometrium
Overweight and obesity	Esophagus Pancreas Colon and rectum Breast (postmenopause) Kidney Gallbladder Endometrium Ovary Liver Prostate (advanced cancer) Hematological malignancies	Fruits and vegetables	Mouth Pharynx Larynx Esophagus Stomach Lung (fruits)
Red meat and processed meat	Colon and rectum	Dietary fiber	Colon and rectum Breast
Salt and salted foods	Stomach	Dairy products	Colon and rectum
Beta-carotene supplements*	Lung Stomach	Breastfeeding	Breast



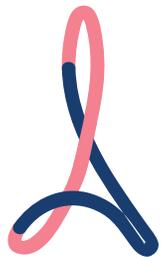
\*Notably for smokers or asbestos-exposed subjects, and a dose >20 mg/d of beta-carotene

# Conclusion

Addressing these priority objectives based on nutritional factors might help populations of developed countries to **reduce the burden of cancer and avoid about 30% of the most frequent cancers** (WCRF/AICR, 2009-2016)

*Latino-Martel et al, Crit Rev Oncol Hematol. 2016 Mar;99:308-23.  
See also [www.e-cancer.fr](http://www.e-cancer.fr) and [www.inra.fr/nacre](http://www.inra.fr/nacre)*

[worldcancercongress.org](http://worldcancercongress.org)



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