Body Composition & Cancer WHISC Ancillary Study

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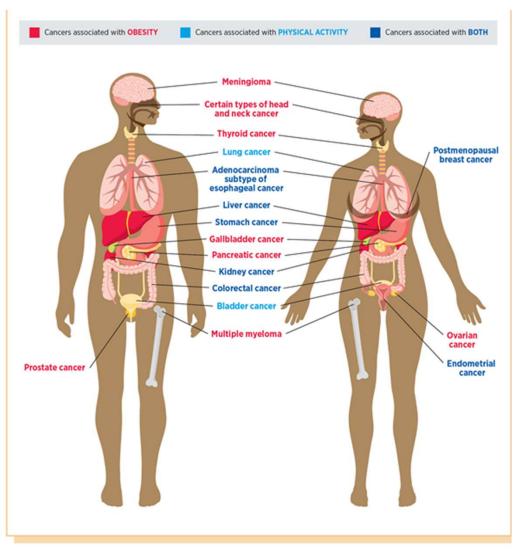
University of Arizona

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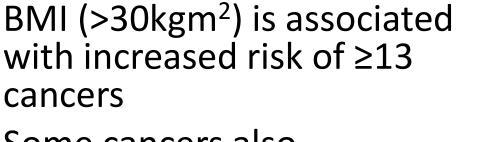


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- American Association for Cancer Research (AACR) Cancer Disparities Progress Report 2020
- Béatrice Lauby-Secretan, et al, Body Fatness and Cancer Viewpoint of the IARC Working Group, N Engl J Med 2016; 375:794-798; https://www.cancer.gov/about-cancer/causes-prevention/risk/obesity/overweight-cancers-infographic



 Some cancers also associated with inadequate physical activity

Obesity defined by elevated

 Some with both high BMI and low physical activity

Obesity and Cancer



	n	%
First incident cancer—any*	2017	20.27
Breast	788	7.92
Invasive	639	6.42
In situ	149	1.5
Colorectal	191	2.17
Lung	254	2.55
Cause of death	n	%
Deaths from all causes	4611	46.34
Cancer	914	9.19
Breast Cancer	87	0.87
Colorectal	88	0.88
Lung Cancer	230	2.31

*after baseline; total sample n=9950

DXA COHORT Cancer Incidence & Deaths



When we split the >10,000 women into 5 equal groups from low to high fat mass (quintiles)

- 88% increase in risk of postmenopausal breast cancer in the highest total body fat mass group
- -2 times increased risk of postmenopausal breast cancer in the highest trunk fat mass group

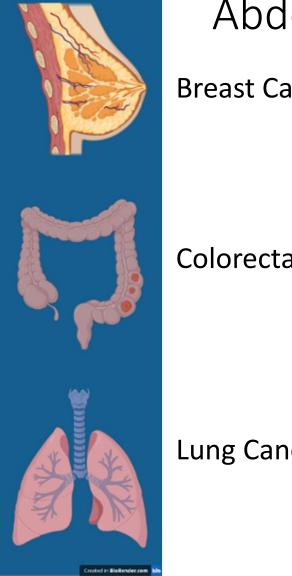
Rohan T, 2013

Among women "normal weight" women split into 4 equal groups (quartiles) of fat mass from low to high (N=3,460)

- 89% increased risk of postmenopausal breast cancer in the highest total body fat mass group
- 88% increased risk of postmenopausal breast cancer in the highest trunk fat mass group

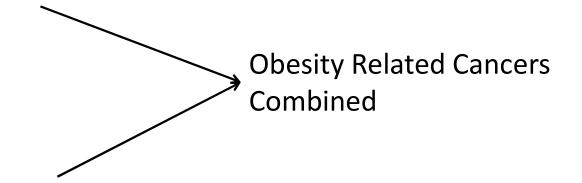
What about abdominal fat?

What about other cancer types?



Abdominal Fat associations with...

Breast Cancer



Colorectal Cancer

Lung Cancer

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Abdominal Adipose Tissue Estimation

Total body, trunk, arms, legs, and abdominal
Abdominal broken into Visceral Adipose Tissue,
Subcutaneous Adipose Tissue

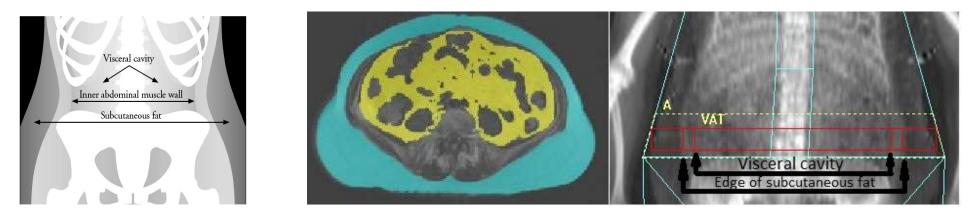


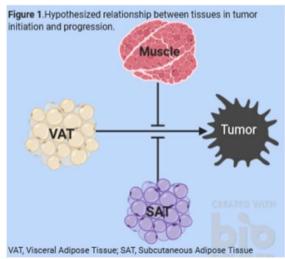
Figure 1. Representative example of abdominal visceral and subcutaneous fat quantification by MRI and DXA techniques.

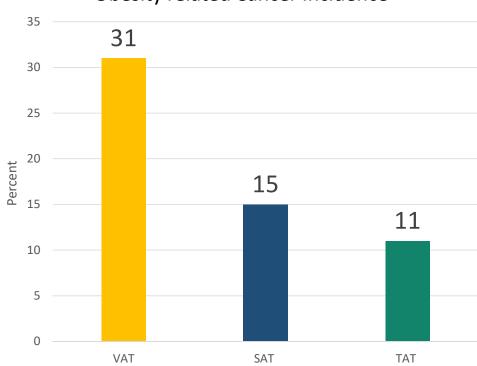
The MRI image (left) represents an axial slice at the L3-L4 intervertebral space; slice thickness is 10mm. The visceral adipose tissue is colored in yellow and subcutaneous adipose tissue is colored in blue. The two-dimensional DXA (right) regions of interest for lateral subcutaneous adipose and total abdominal adipose are demarcated by the lines drawn at L4. Lateral subcutaneous adipose is used to approximate total subcutaneous adipose. Total subcutaneous adipose is then subtracted from total abdominal fat to derive the visceral adipose tissue estimate. DXA image: A, android subregion VAT, visceral adipose tissue

Bea JW, J Clin Densitom; Under Review

- Why abdominal fat?
 - Increased fat/Decreased skeletal muscle with aging
 - Re-distribution of fat, including to the abdomen
- Visceral adipose tissue (VAT) differs from subcutaneous adipose tissue (SAT)
 - Glucose regulation
 - Inflammation
 - Immune function

Central hypothesis: higher VAT levels are the driver of cancer risk

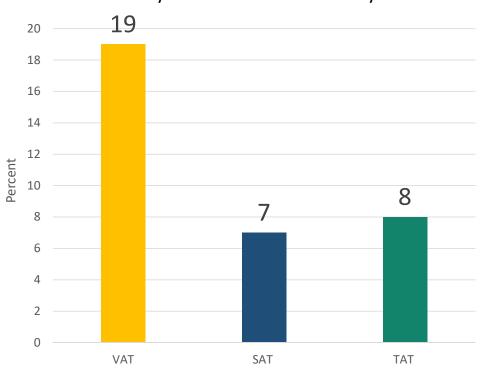




Obesity related Cancer Incidence

Incidence of Obesity related Cancers combined related to abdominal adipose tissue compartments*

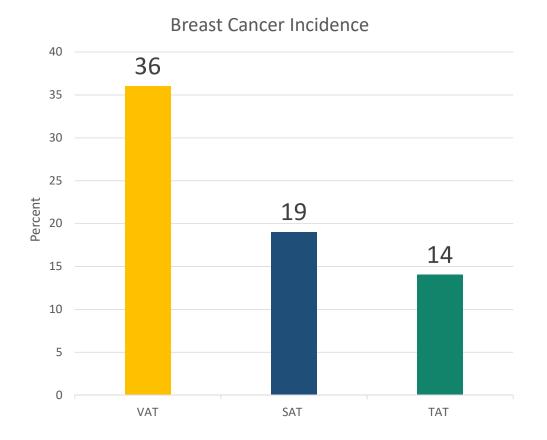
age at baseline, region, education, income, race and ethnicity, hormone therapy trial arm, diet modification trial arm, calcium and vitamin D trial arm, height at baseline, alcohol intake, smoking status, physical activity (MET-hrs/wk), physical function (SF 36 score), total energy intake (kcal/day), HEI-2015 score, hormone therapy, female relative with cancer, oral contraceptive use, age at menarche, age at first birth, total number of months of breastfeeding, age at menopause, surgical menopause



Obesity Related Cancer Mortality

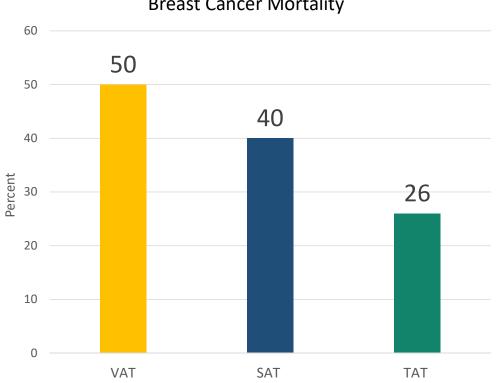
Obesity Related Cancer Mortality

Age at baseline, Region, Education, Income, Race and ethnicity, Hormone Replacement therapy trial arm, Diet Modification trial arm, Calcium and Vitamin D trial arm, height at baseline, alcohol intake, smoking status, Physical activity (METhrs/wk), Physical function (SF 36 score), Total energy intake (kcal/day), HEI-2015 score, Hormone replacement therapy, Aspirin, Metformin, relative with any cancer, Age at menarche, Age at first birth, Total number of months of breastfeeding, Age at menopause



Breast Cancer Incidence*

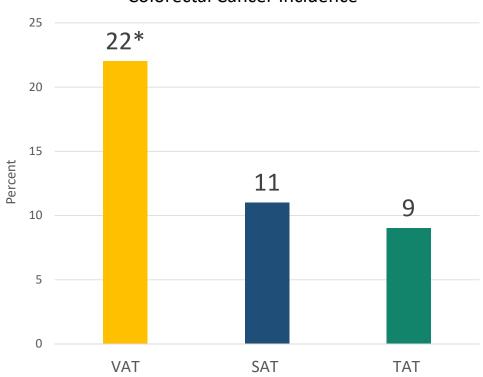
age at baseline, region, education, income, race and ethnicity, trial arm, height at baseline, alcohol intake, smoking status, physical activity (MET-hrs/wk), physical function (SF 36 score), total energy intake (kcal/day), HEI-2015 score, hormone replacement therapy use at baseline, aspirin use at baseline, metformin use at baseline, female relative with breast cancer, age at first birth, total number of months of breastfeeding, age at menopause)



Breast Cancer Mortality

Breast Cancer Mortality*

age at baseline, region, education, income, race and ethnicity, hormone therapy trial arm, diet modification trial arm, calcium and vitamin d trial arm, height at baseline, alcohol intake, smoking status, physical activity (MET-hrs/wk), Physical function (SF 36 score), total energy intake (kcal/day), HEI-2015 score, hormone therapy, aspirin, metformin, female relative with breast cancer, age at menarche, age at first birth, total number of months of breastfeeding, age at menopause, surgical menopause



Colorectal Cancer Incidence

Colorectal Cancer Incidence

age at baseline, region, education, income, race and ethnicity, trial arm, height at baseline, alcohol intake, smoking status, physical activity (METhrs/wk), physical function (SF 36 score), total energy intake (kcal/day), HEI-2015 score, relative with colorectal cancer



Colorectal Cancer Mortality & Lung Cancer Outcomes

In process





PHYSICAL ACTIVITY

HEALTHY DIET

What can we do?

How much activity do I need?

Moderate-intensity aerobic activity

Anything that gets your heart beating faster counts.

Muscle-strengthening activity

Do activities that make your muscles work harder than usual.



Tight on time this week? Start with just 5 minutes. It all adds up!

Physical activity guidelines



TIPS

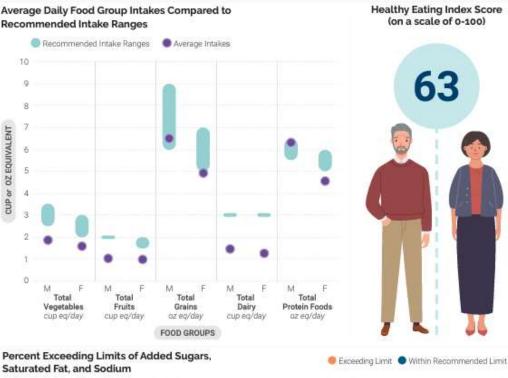
- You may be able to do more than 150 of moderate or 75 minutes of vigorousintensity activity per week (or combination) to promote greater health benefits
- Talk Test for intensity
- Activity can be adapted for things like arthritis and mobility limitations
- Don't forget flexibility and balance activities!

https://www.cdc.gov/physicalactivity/basics/adding-pa/activities-olderadults.htm

Heathy diet assuming 1800 kcal

- 2.5 C vegetables/day
- 1.5 C fruit/day
- 3 C eq dairy/day
- 6 oz eq grains/day
- 5 oz eq protein/day
- 24 g oils/day
- 140 kcal for other uses

Current Intakes: Ages 60 and Older





Data Sources: Average Intakes and HEI-2015 Scores: Analysis of What We Eat in America, NHANES 2015-2016, day 1 dietary intake data, weighted. Recommended Intake Ranges: Healthy U.S.-Style Dietary Patterns (see **Appendix 3**), Percent Exceeding Limits: What We Eat in America, NHANES 2013-2016, 2 days dietary intake data, weighted.

https://www.dietaryguidelines.gov/

- HIGHER ABDOMINAL ADIPOSE OVERALL INCREASES RISK OF CANCER
- VISCERAL ADIPOSE TISSUE IN THE ABDOMEN APPEARS TO BE PARTICULARLY PROBLEMATIC
- THERE MAY BE DIFFERENCES ACROSS POPULATIONS IN TERMS OF RISK THAT NEED TO BE CONFIRMED
- WE CAN IMPROVE BODY COMPOSITION AND CHRONIC DISEASE HEALTH RISKS WITH A HEALTHY DIET AND PHYSICAL ACTIVITY
 - EVEN IF ALREADY NORMAL BODY WEIGHT
 - EVEN IF WEIGHT DOES NOT CHANGE

SUMMARY

Thank you WHI Participants!



The WHISC TEAM

- PI: Jennifer Bea
- Co-ls
 - Andrew Odegaard (UCI)
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- Coordination & Image Analysis
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 - Skye Nicholas
- Statistical Analysis
 - Kimberly Lind

- Consultant
 - Bette Caan (Kaiser DOR)
- Current/Past Trainees
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 - Graduate: Victoria Bland, Arushi Chalke, Erika Walker, Sophia Archibeque, Shelby Ziller
 - ESI: Celina Valencia

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Questions?