

Southern Community Cohort Study

THE SOUTHERN COMMUNITY COHORT STUDY NEWSLETTER IS AN ANNUAL PUBLICATION FOR STUDY PARTICIPANTS.



We are happy to bring you another issue of the Southern Community Cohort Study (SCCS) newsletter.

In this issue, you will learn more about:

- New research on two commonly used drugs, aspirin and statins. Aspirin is often taken in low doses to prevent heart attacks, and statins help lower cholesterol. Can taking these drugs also help prevent certain cancers?
- The tests used to diagnose blood pressure, cholesterol and blood sugar issues. What do the results mean and how do they affect your overall health?
- How sitting for too long may be bad for your health. What effects does sitting have on your health? What can you do about it?

We hope you think this newsletter is a good resource for important health information and encourage you to keep it as a reference.

We appreciate your participation in the SCCS, and we thank you for completing survey #2, the second follow-up. Your commitment to this study helps fight cancer and save lives in the Southeast!

Your Study Team Leaders,

Dr. William J. Blot
Dr. Margaret K. Hargreaves
Dr. Lisa B. Signorello

P.S. Do you have ideas for future newsletter stories? We'd love to hear them! Call the study office at 1(800)734-5057 and talk to the study team.

Research: Effects of Aspirin, Statin Use on Cancer

Taking low-dose or baby aspirin every day helps prevent heart attacks and stroke among people with heart disease or those who are at high risk for it. Many people with high cholesterol take a type of drug called statins (like Lipitor, Crestor, Zocor and Pravachol) to help lower "bad" cholesterol (LDL – see page 3 for more information) in the blood. Now scientists are studying these medications to see if they can prevent cancer from spreading in the body or can keep people from getting certain types of cancer, specifically gastrointestinal cancers.

Scientists looked at participants of long-term health studies who were taking daily low-dose aspirin for heart disease prevention. They determined how many people developed cancer and noticed that people who took low-dose aspirin for at least five years had less chance of getting cancer or dying from cancer than people who did not take aspirin regularly. The chance of the cancer spreading to other parts of the body was also lower among low-dose aspirin users.

Statins have not been shown to reduce the risk of developing cancer, but a new study raises the possibility that statin use may

improve survival among those diagnosed with cancer. A recent Danish study of cancer patients found that patients who were on statin drugs were 15% less likely to die of cancer (or any other cause) than patients who were not taking statins.

Based on these findings, it may be tempting to start taking a daily dose of aspirin for cancer as well as for heart disease prevention. But before adding aspirin into your routine, *it is important to talk to your doctor* to make sure the benefits are greater than the risks. People who take aspirin daily are more likely to have gastrointestinal bleeding, with bleeding risks being more common among people age 65 or older. Also, it is not entirely clear how aspirin works to fight against cancer. In general, having your cholesterol checked regularly, and talking with your doctor about statins if your LDL levels are high are good health practices.

The findings on the positive effects of aspirin and statin use on cancer are exciting, but more research in this area is needed. Indeed, our study team is evaluating whether SCCS participants who are taking aspirin or statins have had fewer rates of cancer or other illnesses.

Phase 2 of SCCS Follow-Up Continues

The second phase of the SCCS participant follow-up continues! Over the past year, about 40% of you received a short mailed survey or a telephone call from a study team member. If you have not completed survey #2 within the past 12 months, we will be in touch with you this year. You may receive survey #2 in the mail or a phone call from a study team member. We want to find out how you are doing and get an update on your health status.

Following participants over time is a big part of this landmark study, and it's important we have your most current contact information. Please help us stay in touch with you! **If your address or telephone number has changed since enrolling in the study, call us at 1 (800) 734-5057 (toll-free) or 1 (904) 398-2924.**

THANK YOU to the more than 21,000 participants who have already completed follow-up survey #2. We look forward to contacting many others soon! Thank you for your commitment to this study and to the fight against cancer!

We remind you that we do not contact participants regarding any individual test results found from conducting our laboratory research as part of this study. Please remember to get your yearly check-up and all recommended health screenings.

For the Love of Kale

It's been called the "queen of greens". A superfood. A nutritional powerhouse. Kale is a hugely popular dark green, leafy vegetable from the same family as cabbage, collard greens, turnip greens and broccoli.

Like its cousins, kale is low in calories, rich in fiber and has no fat. It is chock full of nutrients, including vitamins A (great for your skin and eyesight), C, K (necessary for normal bone health and adequate blood clotting), folate and minerals such as iron and magnesium. Kale has more iron per calorie than beef, is high in calcium, which is essential for good bone health, and is a great source of antioxidants.

Kale comes in many different varieties; however your local grocery store will usually carry the curly variety which has sturdy, silvery green, ruffled leaves.

It is a versatile vegetable and is delicious cooked or raw. Chop kale finely, and add it to soups, stews, pasta and casseroles. Use it as a pizza topping or in place of spinach or collard greens in recipes. For a simple salad, marinate thinly sliced kale in your favorite salad dressing for 15 minutes and top with your favorite veggies.

Eating a variety of vegetables is the cornerstone of a healthy lifestyle, and adding kale to your diet may have significant health benefits.

Kale

Anti-Inflammatory
Low Calorie
Antioxidants
Low Carbohydrates

Vitamin K
Calcium
Vitamin C
Vitamin A
Potassium
Lutein

All hail to kale! Seemingly everywhere you turn, kale is a vital vegetable rich in nutrients, health benefits and delicious flavor.

Per calorie, Kale has

- more iron than beef
- more calcium than milk
- 10x more Vitamin C than spinach

Highs
vitamins A, C & K
calcium
potassium
folic acid
lutein
carotenoids
antioxidants

Lows
calories
fat
carbohydrates

What is it good for?

- eyes
- skin
- reduces the risk of heart disease & cancer
- weight loss
- lowers cholesterol
- bones

Best Friend: Lemon
enhances phytonutrients

Recipes

Sausage, Chicken, Bean & Kale Pilaf

For a quick meal on a busy night, try this one pot wonder, a twist on the classic combination of rice and beans. We followed a simple formula – rice + onions + broth + something spicy/herbs + beans/vegetables – to create a delicious and nutritious dish. A small amount of meat, like spicy sausage, goes a long way and adds flavor to any dish. For extra nutrients, add some kale or your favorite vegetable.

Ingredients

- 2 tablespoons oil (or olive oil or butter)
- 1 small onion, finely chopped
- 1½ cups uncooked brown or white rice
- 2 links sausage (turkey, Andouille or Italian), diced small
- 1 pound cooked boneless, skinless chicken breast, diced small
- 1 bunch (6-8 ounces) kale
- 1 15-ounce can kidney beans
- salt and pepper, to taste
- 3½ cups low-sodium chicken broth
- ½-1 cup water (optional)

Directions

1. Preheat oven to 350 degrees.
2. Remove stems/center ribs from kale. Cut into large pieces.
3. Heat oil in a large oven-proof pot over medium-high heat. Add onion. Cook until soft, ~8 minutes. Add sausage. Cook until sausage starts to brown, ~5 minutes. Add rice, chicken, beans, kale. Season with salt and pepper. Pour in broth and stir. Bring contents to a boil, cover pan with a lid or aluminum foil and transfer pot to oven.
4. Bake for 30-45 minutes. If rice is still firm and no liquid is left, add water, cover pan and return to the oven to cook until rice is tender. Uncover and serve hot. ENJOY!

Note: Brown rice will take longer to cook.

Adapted from Washington Post's Nourish columnist Stephanie Witt Sedgwick

Kale Chips

Next time you're craving potato chips, make kale chips instead! This baked, crunchy snack is not only delicious but nutritious and an excellent source of vitamins. The kale is transformed from dense and bitter to light, crispy and flavorful.

Ingredients

- 1 bunch (6-8 ounces) kale
- 1 tablespoon olive oil
- salt, to taste

Directions

1. Preheat oven to 300°F.
2. Rinse and thoroughly dry kale. Remove stems and tough center ribs. Cut into large pieces. Transfer to a large bowl.
3. Drizzle kale with olive oil and sprinkle with salt (or other seasonings). Use your hands to massage oil and salt onto kale.
4. Arrange leaves in a single layer on a large baking sheet.
5. Bake for 15-20 minutes or until edges are brown and most of kale is crisp. Place baking sheet on a rack to cool. ENJOY!

Know the Numbers for Better Health

Properly managing your health requires understanding many different kinds of numbers. Weight. Height. Fasting blood sugar. HDL. LDL. The list is endless. What do these numbers mean? How do they work together to contribute to the overall quality of your health? We will explain the basics for the results of blood pressure, cholesterol and diabetes tests. However, it is always important to talk to the doctor about your test results.

Blood Pressure

Blood pressure, the force of blood against the walls of your arteries, moves blood through your body so it can get to all of the body's organs. Blood pressure is given as two numbers. Systolic pressure, the top number, is when your heart contracts during a heartbeat. Diastolic pressure, the bottom number, occurs when the heart relaxes between beats. Systolic pressure is the larger of the two numbers. Though many factors, including age, exercise, stress, and sleep, can cause your blood pressure to go up and down during the day, a normal blood pressure is around or a little below 120/80 mmHg (millimeters of mercury, a unit of pressure).

Blood Pressure Category	Systolic mm Hg (upper #)		Diastolic mm Hg (lower #)
Normal	Less than 120	and	Less than 80
Prehypertension	120 – 139	or	80 – 89
High Blood Pressure, Stage 1	140 – 159	or	90 – 99
High Blood Pressure, Stage 2	160 – 179	or	100 – 109
Hypertensive Crisis	180 and above	or	110 and above

Diabetes

Diabetes results when the body does not make enough insulin or cannot use insulin well which causes the levels of glucose (blood sugar) to build up in your blood. Prediabetes is a condition in which blood glucose levels are higher than normal but not high enough to be considered diabetes. Prediabetics are at an increased risk of developing diabetes.

Three blood tests are commonly used to test for diabetes:

A fasting blood glucose test measures the amount of glucose in your blood and is done after not eating anything for at least 8 hours.

A hemoglobin A1c test shows the average blood sugar levels over the last 3 months. This test indicates how well your diabetes is controlled.

An oral glucose tolerance test is typically used to check for diabetes during pregnancy (gestational diabetes). This test takes about 3 hours and involves drinking a high-glucose beverage and taking blood samples at periodic intervals. The test shows how the body breaks down sugar over time.

For diabetics who monitor their blood sugar with a home test, your glucose levels first thing in the morning before eating should be less than 100 mg/dl and lower than 200mg/dl two hours after meals. Your doctor will tell you what your target glucose levels should be.

Fasting Blood Glucose Test mg/dL	Less than 100	Normal	Hemoglobin A1c Test mg/dL	Less than 5.7%	Normal	Oral Glucose Intolerance Test mg/dL	Less than 140	Normal
	100 – 125	Prediabetes		5.7% – 6.4%	Prediabetes		140 – 199	Prediabetes
	126 and above	Diabetes		6.5% and above	Diabetes		200 and above	Diabetes

We hope we have taken some of the mystery out of these common health tests. Having high blood pressure (also called hypertension), high cholesterol and diabetes increases the risk of stroke and heart disease. If these conditions co-exist, the risk increases further. Remember to always discuss the meaning of your specific test results and their effects on your overall health with your doctor.

Cholesterol and Triglycerides

Cholesterol is found in all parts of your body and plays a vital role in keeping us healthy. It makes hormones, helps digest food and supports the workings of the cells in the body. Cholesterol is produced naturally in the body and also comes from food (animal products only). There are two main types of cholesterol: high-density lipoprotein (HDL) and low-density lipoprotein (LDL). LDL, “bad” cholesterol, circulates in the blood and can slowly collect in your artery walls. HDL, “good” cholesterol, helps keep the bad cholesterol from building up. The difference can be remembered by considering the H in HDL is for healthy – the higher it is the better, and the L in LDL is for lousy – the lower it is, the better.

Triglycerides are a type of fat in the blood created from excess food. The body converts any calories it does not need into triglycerides. High triglycerides have been linked to an increased risk of heart disease.

Total cholesterol is a combination of LDL, HDL and other fats. A blood test called a lipid profile measures cholesterol and triglyceride levels.

Total Cholesterol mg/dL	Less than 200	Desirable
	200 – 239	Slightly High
	240 and above	High
HDL “good” cholesterol mg/dL	60 and above	Ideal (↓ risk for heart disease)
	Men: Less than 40 Women: Less than 50	Low (↑ risk for heart disease)
LDL “bad” cholesterol mg/dL	Less than 100	Optimal
	100 – 129	Near Optimal
	130 – 159	Borderline High
	160 – 189	High
	190 and above	Very High
Triglycerides mg/dL	Less than 150	Normal
	150 – 199	Slightly High
	200 – 499	High
	500 and above	Very High

Sitting: Hazardous to Your Health?

Do you remember being asked how active you were when you first joined the Southern Community Cohort Study (SCCS)? Your answers to these physical activity questions helped researchers measure how much time people spend moving compared to not moving each day.

Over half of most people's day is spent in sedentary activities, such as sitting in a car or bus, watching TV or movies or sitting in front of a computer. SCCS participants have similar patterns of sedentary behaviors. Men and women in the study spend 60% of waking time or 9 hours per day sitting. Less than 25% of participants follow the current physical activity guidelines.

Exercising regularly is necessary for good health, and sedentary behaviors are not ideal, but now researchers have learned that too much sitting could be dangerous to your health. Studies have linked sitting for long periods of time to an increased risk of diabetes, heart disease and an unhealthy weight. Even people who exercise regularly are at a higher risk of these health problems if they spend much of the day sitting down.

In addition to regular exercise, taking breaks from long periods of sitting may have a favorable impact on your health. Make small, simple changes that fit into your lifestyle.

- Go for a short walk during the day.
- Stand or walk around while talking on the phone.
- Stand and stretch during television commercials.
- Walk over and talk to a co-worker instead of emailing or texting.

America on the Move, a group that promotes healthy eating and active living, recommends adding 2,000 extra walking steps to your daily routine. Any kind of movement makes positive changes to your overall health. Movement helps your body burn more calories, gives you more energy and helps with weight loss. The more times you get up during long periods of sitting, the better you will feel.



Phase 2 of the follow-up of SCCS participants continues! Participants who have not completed survey #2 within the past 12 months will soon receive a survey in the mail or a telephone call from the study team.

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