Welcome
We are pleased to bring you our 14th annual SCCS newsletter. We hope that you will find the features in this issue both informative and useful. The study team would like to dedicate this issue to SCCS colleague Joseph McLaughlin, Ph.D., who died unexpectedly Dec. 10, 2014.

Dr. McLaughlin co-founded the International Epidemiology Institute in 1994 along with Dr. Blot, after a successful career with the National Cancer Institute, and was an internationally recognized epidemiologist who made numerous contributions toward increasing understanding of the causes of cancer.

He will live on in the work that we do together.

SCCS participants are the best - and we thank you for keeping in touch with us and filling out those follow up surveys. Please be on the lookout for our next SCCS Follow Up Survey Questionnaire which we will begin mailing this summer. Please continue to let us know if you move or change your phone number by calling the Jacksonville, FL office toll free: 1-800-734-5057.

Your Study Team Leaders,
Dr. William J. Blot
Dr. Margaret K. Hargreaves
Dr. Wei Zheng

You eat right...you exercise...why not get your shots?

We make sure that our kids get the recommended vaccines at their check-ups. We take our pets every year to get their “shots”. But did you realize that adults need at least 4 immunizations after age 65?

Many serious diseases can be prevented with a simple vaccine. You should talk to your doctor about which vaccines you need, especially if you have health problems.

But what we are writing to you about today are common diseases that everyone is at risk of developing. Each may be prevented or made less severe with a simple immunization.

✔ FLU SHOT - Every year, all adults should get the “flu shot” to help prevent seasonal influenza. A new combination of inactivated influenza viruses is mixed each year to protect us from the viruses that the World Health Organization predicts will be common. You cannot get the flu from the flu shot. It’s possible to get infected with a different flu strain than what was included in the vaccine. Even so you most likely won’t get as sick if you’ve had a flu shot.

✔ TETANUS BOOSTER - Every 10 years, adults of all ages need to have a “Td booster shot” to keep up their immunity to tetanus (“lockjaw”) and diphtheria. The first time you get the booster shot, it should be a “Tdap booster”, to include immunization to pertussis (“whooping cough”). Maintaining your immunity to tetanus saves a lot of time and worry in case you get a deep puncture wound!

✔ SHINGLES VACCINE - Shingles is a painful re-activation of the chickenpox virus that has remained dormant in nerve cells. To reduce the risk of shingles, a single dose of “Shingles vaccine” is recommended for adults age 60 years or older. Dr. William Schaffner, a member of the SCCS study team and President of the National Foundation of Infectious Diseases, was quoted on WebMD® about the shingles vaccine. He said, “Coverage is available through Medicare, but it can be tough to get approval. You have to work the system a little.” Those with private insurance should ask for it too.

✔ PNEUMONIA VACCINE - Adults aged 65 years or older should receive a single dose of “Pneumonia vaccine” to prevent pneumococcal pneumonia. This respiratory infection can also spread to the blood and nervous system. It is estimated to cause 4 million illnesses and 22,000 deaths annually in the US, mainly in people over age 50.

Note: Some people are sensitive to the ingredients in certain vaccines. For your safety, your doctor’s office or pharmacy will ask you questions about your sensitivities before they give you any vaccine.
We Are Not Alone

Some of you have participated in a new part of our study by donating a stool sample. Thank you! This study is being lead by Dr. Wei Zheng at Vanderbilt University. It is being conducted because new research suggests that the microbes (like bacteria) that live in our intestines may keep us healthy. This group of friendly gut residents, known as the “microbiome”, may help prevent obesity, diarrhea, and possibly even cancer, heart disease, and diabetes!

The journal Science recently published the story of Dr. Liping Zhao. Dr. Zhao was concerned about his own poor health and weight gain. He decided to test these theories about the gut microbiome on himself. He changed his eating habits and began eating “prebiotic” foods. These are foods which are believed to promote the growth of good bacteria in the gut. Not only did he lose weight, but his high blood pressure and cholesterol levels came down. One species of good bacteria in his gut increased from 0% to 14.5% of his total gut microbiome.

Dr. Zhao learned that the unhealthy changes in his gut microbes brought on by eating a high-fat diet were completely reversible. In 2010, he shared his story with the Human Microbiome Project at the National Institutes of Health. This started a flurry of new studies to figure out how eating more prebiotic foods, like fresh vegetables, might help increase the good bacteria in our gut and naturally reduce obesity in humans.

“Prebiotics” are food fibers that grow naturally in plants. These plant foods support the growth of beneficial bacteria, called “probiotics”, in your large intestine.

Eating prebiotic foods, and eating fermented foods containing live cultures of probiotics, is something that YOU can easily do which may improve your health. We have included examples of some important prebiotic and probiotic foods here. We are also sharing a recipe to make your own uncooked, unpasteurized, unprocessed, unpickled sauerkraut. This features a prebiotic food – cabbage – that has fermented to become a probiotic food. It’s worth the effort!

**PREBIOTIC FOODS** (mainly non-starchy veggies, low sugar fruits and whole grains)
- Asparagus
- Berries
- Cabbage
- Garlic
- Jerusalem artichoke (also called sunchoke root)
- Leeks
- Oatmeal
- Onion

**PROBIOTIC FOODS** (fermented foods containing live cultures-must be refrigerated in stores and at home-must serve uncooked)
- Kefir
- Kimchi
- Sauerkraut
- Tempeh
- Yogurt

Remember: take care of the trillions of microbes that we share our bodies with so that they will take care of us!

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Homemade Sauerkraut – from Skinny Gut Diet by Brenda Watson, CNC

- 5 Tbsp. sea salt, divided for steps 1, 2, and 3
- 4 cups water
- 2 heads cabbage, red or green, cored and shredded (if this makes less than 4 cups cabbage then decrease amount of salt sprinkled in steps 2 and 3)
- 10 wide mouth jars (12 oz) or 1 gallon crock/glass pan with lid

**Note:** Never cook, or “can”, as heat will destroy the good bacteria.

**STEP 1** Make the brine - stir 3 Tbsp. salt into room temperature water and let it sit to make sure the salt is dissolved.

**STEP 2** Place the shredded cabbage in a big bowl and sprinkle 1 Tbsp. salt, then massage and squeeze it with clean hands - “bruising” the cabbage allows cell walls to break so juices are released. Sprinkle salt sparingly – do not increase amount – you may need to decrease according to cabbage size.

**STEP 3** Transfer the cabbage to ten 12 oz wide-mouth jars or a 1 gallon crock/glass pan with a lid, sprinkle with the remaining 1 Tbsp. salt, and cover with brine. You may need to push down or weigh the cabbage down to make sure it is covered with brine. The brine mixture should be no closer than 1 inch from the lid.

**STEP 4** Cover with lid and place in a dark, warm place in your kitchen, such as a cabinet or pantry. Fermentation will take place at “room temperature” but will take longer. Every 3 days lift the lid to release pressure. Check to make sure that cabbage remains covered in brine – you may need to add brine. Allow to ferment for at least 7 days.

**STEP 5** After 7 days, taste the sauerkraut. You can allow it to ferment up to 10 days, until it is to your liking. After that, store it lidded in the refrigerator to slow the fermentation and set the flavor. Serve with a slotted spoon cold or at room temperature.

**Note:** Because salt should be limited in a healthy diet, this should be the only “salty tasting” food eaten during that meal.
The Federal government will soon publish the *2015 Dietary Guidelines for Americans*. These will reflect a growing consensus among nutrition scientists that “dietary cholesterol is no longer considered a nutrient of concern for overconsumption.” What, are they saying that foods high in cholesterol are not “bad” for me anymore? Yes! Why are the Dietary Guidelines changing? “Evidence suggests that there is no appreciable relationship between heart disease and dietary cholesterol.” Because they now know that for the majority of us* “cholesterol in food has little effect on the amount of cholesterol in the bloodstream.”

*Note: 75% of Americans process cholesterol in food normally. Talk to your doctor about your family history to make sure that you are not in the small group who do not. Here are the ANSWERS to the quiz, which apply to the majority of us:

**Question #1 Answer:** b.) Aim for LDL score below 100 on your yearly blood tests.

**Question #2 Answer:** a.) Aim for HDL score of 60 or higher on your yearly blood tests.

**Question #3 Answer:** b.) Aim for a triglyceride score of less than 150 on your yearly blood tests.

**Question #4 Answer:** d.) The more saturated fat (naturally solid fat) you eat, the higher your “bad” blood cholesterol can rise. The more trans fat (artificially solidified fat) you eat, the more your “bad” blood cholesterol can rise AND your “good” blood cholesterol can drop.

**Question #5 Answer:** a.) Trans fat sends both your good and bad blood cholesterol levels in the wrong direction. It’s used in baked goods, snack foods, margarine, shortening and fried foods. Check the ingredients for “partially hydrogenated oil”, which is another name for trans fats.

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We remind all our participants that we will **not** contact you 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.
Last year SCCS staff and health professionals nationwide celebrated one of the most successful public health campaigns in modern history. This was the 1964 U.S. Surgeon General’s “Report on Smoking and Health.” This report, plus the anti-smoking campaigns that began in the 1960s, have saved 8 million Americans from premature death from the effects of tobacco smoke!

Sadly, more than 20 million Americans died because of smoking during that same time period. Tobacco use accounts for at least 30% of all cancer deaths, and is the leading cause of cancers of the lung, oral cavity, bladder, esophagus, kidney and pancreas.

In addition, smoking leads to lung diseases like emphysema and chronic bronchitis, and cardiovascular diseases like heart attacks and strokes. It is “the leading cause of preventable disease and death”, according to Dr. Hilary Tindle. Dr. Tindle is a leading expert in tobacco and cancer, and recently joined the faculty of Vanderbilt University to help patients at the Vanderbilt University Medical Center quit smoking.

Looking forward to the next 50 years...What if we could help every smoker to quit and keep young people from starting in the first place? If everyone stopped using tobacco, 1 out of 3 cancer deaths in this country could be prevented. The SCCS is doing its part. Four out of every ten of you smoked when you enrolled in the study. Because of this SCCS has published 5 papers in medical journals about smoking and the health of our cohort in recent years. This research shows that both menthol and non-menthol cigarettes strongly increase cancer risk. You can view these publications at www.southerncommunitystudy.org or mail us a request for copies.

It takes more than 1 try to quit. Dr. Tindle says that quit aids like nicotine replacement products, prescription medications, and counseling programs can raise the chances of success. We are making plans to give SCCS participants who still smoke the help they need to quit for good.

Until then, there is help available now for you or your loved ones to change smoking habits. Ask your doctor...or call the toll free QUIT LINE at 1-877-448-7848. Please make that your personal celebration of this 50th anniversary of knowing the truth about tobacco.