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Summary

Primary and secondary prevention of cancer with lifestyle interventions: 7000 steps to success

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Small Intestine & Nutrition | Digestive Oncology

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The speaker reviewed evidence-based lifestyle modifications for primary and secondary cancer prevention, emphasizing tobacco and alcohol cessation, Mediterranean diet adherence, limiting ultra-processed foods, and regular physical activity.

KEY POINTS

- Tobacco (over 4000 chemicals, 70 carcinogens) is associated with digestive cancers including oesophageal, gastric, pancreatic (two to threefold risk), and colon cancer (twofold risk), with combustible cigarettes carrying higher risk than non-combustible products as stated in a Korean study of more than 5 million participants.
- Alcohol is carcinogenic for at least seven cancer types (ENT, oesophagus, liver, colorectal, breast) through acetaldehyde toxicity and oestrogen elevation; even light consumption (less than one drink per day) increases breast cancer recurrence risk, with synergistic effects when combined with tobacco.
- Mediterranean diet adherence showed a linear reduction in obesity-related cancer incidence (up to 5%) over 14 years in the EPIC trial extension; benefits include short-chain fatty acid production protecting against colon cancer and anti-inflammatory effects from antioxidants and omega-3.
- Ultra-processed foods (one-third of young US generation consumption) were independently associated with increased colorectal cancer risk in men and all-cause mortality, according to the speaker's cited US and Italian studies.
- Physical activity with a target of 7000 steps daily (the stated sweet spot in a 57-study meta-analysis) reduced all-cause mortality and cancer incidence; an exercise intervention in resected colon cancer patients receiving adjuvant chemotherapy showed better outcomes than health education alone.

– The speaker recommends avoiding supplements in cancer patients because effects on cancer are unknown, and in the Q&A stated that while refined sugar is not good for metabolic reasons, there is no evidence of direct cellular toxicity or need to eliminate all carbohydrates.

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