

essentials of health

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A study published in the Journal of the National Cancer Institute conducted by Chinese and U.S. scientists found that a specific combination of nutritional supplements reduced cancer incidence and mortality over a ten year period.

BENEFITS OF NUTRITIONAL SUPPLEMENT COMBINATION STILL EVIDENT A DECADE AFTER TRIAL COMPLETION

The General Population Nutrition Intervention Trial was a randomized cancer prevention trial involving 29,584 participants conducted from 1985 to 1991. The trial tested the effects of select vitamin and mineral supplement combinations on the risk of esophageal and gastric cardia cancer on residents of Linxian, China, who have some of the highest cancer rates in the world. The supplement treatment called "factor D," containing a combination of 50 μ g selenium, 30 mg vitamin E, and 15 mg beta-carotene, led to decreased mortality from all causes, overall cancer and gastric cancer. In the present paper, researchers present results of a 10-year follow-up after the end of the original trial.

From the beginning of the trial through May, 2001, 9,727 deaths occurred, including 3,242 from cancer, 1,515 from esophageal cancer, and 1,199 from gastric cancer. Ten years after the end of the trial, participants who took factor D still had a 5% reduction in total mortality and 11% reduction in gastric cancer. The greatest benefit was observed among participants younger than 55 years, who also experienced a 17% reduction in esophageal cancer.

The beneficial effects of selenium, vitamin E, and beta-carotene on mortality and cancer risk were still evident up to 10 years after completing the supplement trial and were consistently greater in younger participants. The results of the follow-up validate the original trial findings and indicate that even short-term supplementation may result in long-term benefits.

Qiao YL et al. Total and cancer mortality after supplementation with vitamins and minerals: follow-up of the Linxian General Population Nutrition Intervention Trial Journal of the National Cancer Institute 2009 101(7):507-518.