

# CANCER

## Dietary Lycopene and Disease Risk

### Brain Cancer- main findings

- Inconclusive

#### Summary of studies and outcomes

- Number of studies = 1
- Risk estimates = 1
  - (-) = 0
  - N = 0
  - (+) = 1

**Table: Relationship between Dietary Lycopene and Risk for Brain Cancer**

Study Type	N= studies	NEGATIVE ASSOCIATION (protective)					NEUTRAL ASSOCIATION (no associated risk or benefit)					POSTIVE ASSOCIATION (risk factor)				
		Sample size, n=					Sample size, n=					Sample size, n=				
Breast		≤100	101-200	201-500	501-1000	≥1000	≤100	101-200	201-500	501-1000	≥1000	≤100	101-200	201-500	501-1000	≥1000
RCT	0															
Interv	0															
PC	1															√ <sub>Lyc</sub>
CC	0															
Cross Sec	0															
Eco	0															

√<sub>Lyc</sub> Relationship between dietary lycopene and Brain cancer.

### Breast Cancer- main findings

- Data support a neutral, although potentially protective, relationship between dietary lycopene and breast cancer risk

#### Summary of studies and outcomes

- Number of studies = 17
- Risk estimates = 18
  - (-) = 6
  - N = 12

**Table: Relationship between Dietary Lycopene and Risk for Breast Cancer**

Study Type	N= studies	NEGATIVE ASSOCIATION (protective)					NEUTRAL ASSOCIATION (no associated risk or benefit)					POSTIVE ASSOCIATION (risk factor)				
		Sample size, n=					Sample size, n=					Sample size, n=				
Breast		≤100	101-200	201-500	501-1000	≥1000	≤100	101-200	201-500	501-1000	≥1000	≤100	101-200	201-500	501-1000	≥1000
RCT	0															
Interv	0															
PC	4						√Lyc				√Lyc					√Lyc
CC	11	√Lyc	√Lyc	√Lyc		√Lyc			√Lyc		√Lyc					
Cross Sec	2			√Lyc					√Lyc							
Eco	0															

√Lyc Relationship between dietary lycopene and Breast cancer.

## Cervical Cancer- main findings

- Data suggest a protective relationship between dietary lycopene intake and cervical cancer; however studies are few with limited sample size and the p-value for 1 'protective' inferring risk estimate was modest (p=0.10).

### Summary of studies and outcomes

- Number of studies = 2
- Risk estimates = 3
  - (-) = 3
- Risk estimates by Tomato or Lycopene category
  - √GT G. Tom = 1 (-)
  - √Lyc Lyco = 2 (-)

**Table: Relationship between Dietary Lycopene and Risk for Cervical Cancer**

Study Type	N= studies	NEGATIVE ASSOCIATION (protective)					NEUTRAL ASSOCIATION (no associated risk or benefit)					POSTIVE ASSOCIATION (risk factor)				
		Sample size, n=					Sample size, n=					Sample size, n=				
Cervical		≤100	101-200	201-500	501-1000	≥1000	≤100	101-200	201-500	501-1000	≥1000	≤100	101-200	201-500	501-1000	≥1000
RCT	0															
Interv	0															
PC	0															
CC	2	√ <sub>Lyc</sub>	√ <sub>GT</sub> √ <sub>Lyc</sub>													
Cross Sec	0															
Eco	0															

\* More than 1 risk estimate may be derived from a study within a study type.

## Colorectal Cancer- main findings

Data support a neutral association between dietary lycopene and colorectal cancer risk; however 2 relatively large observational studies are suggesting a risk relationship associated dietary lycopene intake. These findings require follow up.

### Summary of studies and outcomes

- Number of studies = 13
- Risk estimates = 14
  - (-) = 3
  - N = 9
  - (+) = 2

**Table: Relationship between Dietary Lycopene and Risk for Colorectal Cancer**

Study Type	N= studies	NEGATIVE ASSOCIATION (protective)					NEUTRAL ASSOCIATION (no associated risk or benefit)					POSTIVE ASSOCIATION (risk factor)				
		Sample size, n=					Sample size, n=					Sample size, n=				
Colorectal		≤100	101-200	201-500	501-1000	≥1000	≤100	101-200	201-500	501-1000	≥1000	≤100	101-200	201-500	501-1000	≥1000
RCT	0															
Interv	0															
PC	3							√ <sub>Lyc</sub>			√ <sub>Lyc</sub> √ <sup>*</sup> <sub>Lyc</sub>					√ <sup>*</sup> <sub>Lyc</sub>
CC	10	√ <sub>Lyc</sub>		√ <sub>Lyc</sub>	√ <sub>Lyc</sub>				√ <sub>Lyc</sub> √ <sub>Lyc</sub> √ <sub>Lyc</sub>	√ <sub>Lyc</sub>	√ <sub>Lyc</sub> √ <sub>Lyc</sub>			√ <sub>Lyc</sub>		
Cross Sec	0															
Eco	0															

√<sub>Lyc</sub> Relationship between dietary lycopene and colorectal cancer.

√<sup>\*</sup><sub>Lyc</sub> Asterisk indicate same study. Positive relationship is specific to rectal cancer in men.

## Endometrial Cancer- main findings

- Data indicate a neutral relationship between dietary lycopene and endometrial cancer risk.

### Summary of studies and outcomes

- Number of studies = 4
- Risk estimates = 4
  - (-) = 1
  - N = 3

**Table: Relationship between Dietary Lycopene and Risk for Endometrial Cancer**

Study Type	N= studies	NEGATIVE ASSOCIATION (protective)					NEUTRAL ASSOCIATION (no associated risk or benefit)					POSTIVE ASSOCIATION (risk factor)				
		Sample size, n=					Sample size, n=					Sample size, n=				
Endometrial		≤100	101-200	201-500	501-1000	≥1000	≤100	101-200	201-500	501-1000	≥1000	≤100	101-200	201-500	501-1000	≥1000
RCT	0															
Interv	0															
PC	1								√ <sub>Lyc</sub>							
CC	3			√ <sub>Lyc</sub>					√ <sub>Lyc</sub>	√ <sub>Lyc</sub>						
Cross Sec	0															
Eco	0															

√<sub>Lyc</sub> Relationship between dietary lycopene and Endometrial cancer.

## Gastric/oral (Upper GI) Cancer- main findings

- Data support a neutral, potentially protective relationship for some people between dietary lycopene and gastric/upper GI cancer.

### Summary of studies and outcomes

- Number of studies = 11
- Risk estimates = 11
  - (-) = 4
  - N = 7

**Table: Relationship between Dietary Lycopene and Risk for Gastric & Upper GI Cancer**

Study Type	N= studies	NEGATIVE ASSOCIATION (protective)					NEUTRAL ASSOCIATION (no associated risk or benefit)					POSTIVE ASSOCIATION (risk factor)				
		Sample size, n=					Sample size, n=					Sample size, n=				
Gastric/oral/ (Upper GI)		≤100	101-200	201-500	501-1000	≥1000	≤100	101-200	201-500	501-1000	≥1000	≤100	101-200	201-500	501-1000	≥1000
RCT	0															
Interv	0															
PC	4			√ <sub>Lyc</sub>				√ <sub>Lyc</sub>	√ <sub>Lyc</sub> √ <sub>FV</sub>							
CC	7		√ <sub>Lyc</sub>	√ <sub>Lyc</sub>		√ <sub>Lyc</sub>		√ <sub>Lyc</sub>	√ <sub>Lyc</sub> √ <sub>Lyc</sub> √ <sub>Lyc</sub>							
Cross Sec	0															
Eco	0															

√<sub>Lyc</sub> Relationship between dietary lycopene and gastric/upper GI cancer.

√<sub>FV</sub> Relationship with disease based on fruits and vegetables considered rich in lycopene.

## Lung Cancer- main findings

- Data support a neutral, although favoring protective, relationship between dietary lycopene and lung cancer.

### Summary of studies and outcomes

- Number of studies = 6
- Risk estimates = 6
  - (-) = 2
  - N = 4

**Table: Relationship between Dietary Lycopene and Risk for Lung Cancer**

Study Type	N= studies	NEGATIVE ASSOCIATION (protective)					NEUTRAL ASSOCIATION (no associated risk or benefit)					POSTIVE ASSOCIATION (risk factor)				
		Sample size, n=					Sample size, n=					Sample size, n=				
Lung		≤100	101-200	201-500	501-1000	≥1000	≤100	101-200	201-500	501-1000	≥1000	≤100	101-200	201-500	501-1000	≥1000
RCT	0															
Interv	0															
PC	3				√ <sub>Lyc</sub>	√ <sub>Lyc</sub>				√ <sub>Lyc</sub>						
CC	3						√ <sub>Lyc</sub>	√ <sub>Lyc</sub>								
Cross Sec	0															
Eco	0															

√<sub>Lyc</sub> Relationship between dietary lycopene and lung cancer.

## Ovarian Cancer- main findings

- Data suggest that dietary lycopene is neutral in its association with ovarian cancer; however, processed tomato consumption may provide some level of protection.
- Menopausal status may be an important factor for determining benefit of lycopene/lycopene-rich foods.
  - One study suggested the benefit of dietary lycopene was specific to premenopausal women, whereas alpha-carotene was beneficial in postmenopausal women.

### Summary of studies and outcomes

- Number of studies = 4

Risk estimates (RE) = 5

- (-) = 2
- N = 3

Risk estimates by Tomato or Lycopene category

- √PT P. Tom = 1 (-)
- √Lyc Lyco = 1 (-), 3 (N)

**Table: Relationship between Dietary Lycopene and Risk for Ovarian Cancer**

Study Type	N= studies	NEGATIVE ASSOCIATION (protective)					NEUTRAL ASSOCIATION (no associated risk or benefit)					POSTIVE ASSOCIATION (risk factor)				
		Sample size, n=					Sample size, n=					Sample size, n=				
Ovarian		≤100	101-200	201-500	50 -1000	≥1000	≤100	101-200	201-500	501-1000	≥1000	≤100	101-200	201-500	501-1000	≥1000
RCT	0															
Interv	0															
PC	1									√ <sub>Lyc</sub>						
CC	3				√ <sub>Lyc</sub> <sup>PT</sup>			√ <sub>Lyc</sub>		√ <sub>Lyc</sub>						
Cross Sec	0															
Eco	0															

\* More than 1 risk estimate may be derived from a study within a study type.

## Pancreatic Cancer - main findings

- The data indicate a limited possible protective association between dietary lycopene, and tomatoes as a source of lycopene, and pancreatic cancer. Data are limited.

### Summary of studies and outcomes

- Number of studies = 2
- Risk estimate (RE): 3
  - (-) = 2
  - N = 1
- Risk estimates by Tomato or Lycopene category
  - √GT G. Tom = 1 (-)
  - √Lyc Lyco = 1 (-), 1 (N)



**Table: Relationship between Dietary Lycopene and Risk for Pancreatic Cancer**

Study Type	N= studies	NEGATIVE ASSOCIATION (protective)					NEUTRAL ASSOCIATION (no associated risk or benefit)					POSTIVE ASSOCIATION (risk factor)				
		Sample size, n=					Sample size, n=					Sample size, n=				
Pancreatic		≤100	101-200	201-500	501-1000	≥1000	≤100	101-200	201-500	501-1000	≥1000	≤100	101-200	201-500	501-1000	≥1000
RCT	0															
Interv	0															
PC	0															
CC	2			√ <sub>Lyc</sub> √ <sub>GT</sub>				√ <sub>Lyc</sub>								
Cross Sec	0															
Eco	0															

\* More than 1 risk estimate may be derived from a study within a study type.

## Prostate Cancer- main findings

- Data may support a protective relationship between dietary lycopene intake and prostate cancer risk.
- Tomatoes (as a general category) or processed tomatoes (specifically) are main sources of dietary lycopene and support a protective effect of tomato/lycopene-rich foods on prostate cancer.

## Summary of studies and outcomes

- Number of studies = 15
- Risk estimates (RE) = 21
  - (-) = 13
  - N = 8
- Risk estimates by Tomato or Lycopene category
  - √<sub>GT</sub> G. Tom = 4 (-)
  - √<sub>PT</sub> P. Tom = 2 (-)
  - √<sub>Lyc</sub> Lyco = 7 (-), 8 (N)

**Table: Relationship between Dietary Lycopene and Risk for Prostate Cancer**

Study Type	N= studies	NEGATIVE ASSOCIATION (protective)					NEUTRAL ASSOCIATION (no associated risk or benefit)					POSTIVE ASSOCIATION (risk factor)				
		Sample size, n=					Sample size, n=					Sample size, n=				
Prostate		≤100	101-200	201-500	501-1000	≥1000	≤100	101-200	201-500	501-1000	≥1000	≤100	101-200	201-500	501-1000	≥1000
RCT	0															
Interv	0															
PC	4					√ <sub>GT</sub> √ <sub>PT</sub> √ <sub>Lyc</sub>								√ <sub>Lyc</sub> √ <sub>Lyc</sub>	√ <sub>Lyc</sub>	
CC	11	√ <sub>Lyc</sub> √ <sub>PT</sub> √ <sub>GT</sub>	√ <sub>GT</sub> √ <sub>Lyc</sub>	√ <sub>GT</sub> √ <sub>Lyc</sub>	√ <sub>Lyc</sub>			√ <sub>Lyc</sub>	√ <sub>Lyc</sub> √ <sub>Lyc</sub>	√ <sub>Lyc</sub> √ <sub>Lyc</sub>						
Cross Sec	0															
Eco	0															

\* More than 1 risk estimate may be derived from a study within a study type.

## Renal Cell Cancer- main findings

- Data support a neutral relationship between dietary lycopene intake and renal cell cancer risk.

### Summary of studies and outcomes

- Number of studies = 3
- Risk estimates (RE) = 3
  - N = 3
- Risk estimates by Tomato or Lycopene category
  - √<sub>GT</sub> G. Tom = 0
  - √<sub>PT</sub> P. Tom = 0
  - √<sub>Lyc</sub> Lyco = 3 (N)

**Table: Relationship between Dietary Lycopene and Risk for Prostate Cancer**

Study Type	N= studies	NEGATIVE ASSOCIATION (protective)					NEUTRAL ASSOCIATION (no associated risk or benefit)					POSTIVE ASSOCIATION (risk factor)				
		Sample size, n=					Sample size, n=					Sample size, n=				
Renal		≤100	101-200	201-500	501-1000	≥1000	≤100	101-200	201-500	501-1000	≥1000	≤100	101-200	201-500	501-1000	≥1000
RCT	0															
Interv	0															
PC	1										√ <sub>Lyc</sub>					
CC	2										√ <sub>Lyc</sub>	√ <sub>Lyc</sub>				
Cross Sec	0															
Eco	0															

\* More than 1 risk estimate may be derived from a study within a study type.

### Uterine Cancer- main findings

- 1 PC study (n=6302 cases, cohort 82,512, Nurses' Health Study II)
  - RE: N

### Mortality- main findings

Total Mortality (EPIC-Spain) [2007, 2008 publications – same data, different Journals]

- PC study (n=562 deaths of ~ 41,000)
- RE: (-)