

# Dietary intakes in polyphenols and risk of cancers in the EPIC cohort

<b>Submission date</b> 10/10/2017	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 12/10/2017	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 17/08/2018	<b>Condition category</b> Cancer	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

### Background and study aims

Polyphenols are natural components of most plants. Major food sources are berries, fruits, coffee, tea, chocolate, wine, beer, vegetables, legumes and cereals. The most convincing evidence of the benefits of polyphenols for health is the protection against heart diseases. Besides this evidence, polyphenols may also play a role in the prevention of other diseases such as diabetes, neurodegenerative diseases and cancer. The protective properties of polyphenols against cancer have been well documented in a number of animal studies. Progress has been hampered by the limited availability of data on the content of polyphenols in foods. The main database on polyphenol content in foods used so far was developed by the United States Department of Agriculture. However, this database does not cover the wide diversity of polyphenols found in foods. To address this gap, a new comprehensive database on polyphenol contents in foods, Phenol-Explorer ([www.phenol-explorer.eu](http://www.phenol-explorer.eu)), was recently created. This database represents major progress over the previous tools available. The aim of this study is to use the Phenol-Explorer database to explore the link between polyphenol intake and cancer risk.

### Who can participate?

Healthy volunteers aged 30-70 participating in the European Prospective Investigation into Cancer and nutrition (EPIC) study

### What does the study involve?

The EPIC participants' polyphenol intakes are estimated from questionnaires and 24-hour diet recalls. Cancer incidence is assessed using data from national or regional cancer registries, in order to find out if there are links between dietary polyphenol intake and the risk of cancer.

### What are the possible benefits and risks of participating?

Due to the observational nature of the study there are no direct benefits for the patient, but they will contribute to the general advance in knowledge for the role of polyphenols in the prevention of cancer. No risks are involved other than minor incidents due to blood sampling.

### Where is the study run from?

International Agency for Research on Cancer (France)

When is the study starting and how long is it expected to run for?  
August 2010 to June 2014

Who is funding the study?

1. Institut National du Cancer, Paris (INCa)
2. Wereld Kanker Onderzoek Fonds (WCRF)
3. Hellenic Health Foundation

Who is the main contact?

Dr Augustin Scalbert  
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## Contact information

### Type(s)

Scientific

### Contact name

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## Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

WCRF NL 2012/604

## Study information

### Scientific Title

Dietary intakes in polyphenols and risk of cancers in the EPIC cohort

### Study objectives

Polyphenols are plant secondary metabolites ubiquitously found in plant-based foods. Given their antioxidant, antiproliferative and antiapoptotic properties and their average consumption of over one gram per day in most diets, the hypothesis is that some polyphenols protect against certain types of cancers.

## **Ethics approval required**

Old ethics approval format

## **Ethics approval(s)**

All the centers participating in the European Prospective Investigation into Cancer and Nutrition (EPIC) received ethics approval from their respective institutions before recruitment of the first participant.

International Agency for Research on Cancer Ethics Committee (IEC), 16/12/2014, ref: IEC Meeting 14-05

## **Study design**

Prospective cohort study

## **Primary study design**

Observational

## **Secondary study design**

Cohort study

## **Study setting(s)**

Community

## **Study type(s)**

Other

## **Participant information sheet**

No participant information sheet available

## **Health condition(s) or problem(s) studied**

Cancer of the breast, prostate, endometrium, ovary, lung and thyroid

## **Interventions**

Polyphenol intakes of the EPIC participants were estimated from dietary questionnaires (DQ) administered at baseline and from 24-hour diet recalls (24HDR) used in the calibration sub-study. A large polyphenol food composition table was first developed for the 24HDR foods and using the data available in Phenol-explorer, a unique and comprehensive database on polyphenol contents in foods that was created through a rigorous compilation of 60,000 original content values from the scientific literature ([www.phenol-explorer.eu](http://www.phenol-explorer.eu)). Phenol-Explorer includes mean content values for 500 polyphenols in more than 450 food and beverage items. This consisted of matching ~20,000 food items between EPIC and Phenol-Explorer foods and correcting for loss during food processing using retention factors. The EPIC polyphenol food composition table was then linked to the DQ foods. Polyphenol intakes of the EPIC participants were calculated from both dietary assessment approaches across all EPIC centres. Dietary sources of polyphenols were then identified and variability within Europe was measured.

The trialists prospectively examined associations between dietary intakes in polyphenols in the different centres of the EPIC cohort and the risk of cancer during follow-up from baseline to 2007. Cox proportional hazards regression models were used to estimate relative risks and 95% confidence intervals. Multivariable models were adjusted on known risk factors for each cancer site studied to account for confounding. Interactions with potential effect modification factors,

which could provide new insights into mechanistic pathways, was investigated and stratified analyses performed when needed.

### **Intervention Type**

Other

### **Primary outcome measure**

Cancer incidence, assessed by record linkage with national or regional cancer registries approximately every two years during the study from baseline to 2007

### **Secondary outcome measures**

Total and individual polyphenol intake across EPIC and socio-demographic factors associated with polyphenol intake, assessed at baseline, between 1992 and 2000 depending on the EPIC centre

### **Overall study start date**

01/08/2010

### **Completion date**

10/06/2014

## **Eligibility**

### **Key inclusion criteria**

1. Healthy volunteers residing within defined geographical areas, with some exceptions: women of a health insurance company for teachers and school workers (France), women attending breast cancer screening (Utrecht-The Netherlands, and Florence-Italy), mainly blood donors (most centers in Italy and Spain) and a cohort consisting predominantly of vegetarians (the 'health-conscious' group in Oxford, UK)
2. Aged 30-70

### **Participant type(s)**

Healthy volunteer

### **Age group**

Adult

### **Sex**

Both

### **Target number of participants**

500,000 overall for 10 European countries, number varies by EPIC country/center

### **Key exclusion criteria**

Does not meet inclusion criteria

### **Date of first enrolment**

01/09/1992

### **Date of final enrolment**

31/12/2000

## **Locations**

### **Countries of recruitment**

Denmark

England

France

Germany

Greece

Italy

Netherlands

Norway

Spain

Sweden

United Kingdom

### **Study participating centre**

**Paris, France**

France

69076

### **Study participating centre**

**Athens, Greece**

Greece

10679

### **Study participating centre**

**Aarhus, Denmark**

Denmark

8000

### **Study participating centre**

**Copenhagen**

Denmark

2100

**Study participating centre**

**Tromso, Norway**

Norway

9019

**Study participating centre**

**Malmö, Sweden**

Sweden

21119

**Study participating centre**

**Umeå, Sweden**

Sweden

90187

**Study participating centre**

**Utrecht, Netherlands**

Netherlands

3584

**Study participating centre**

**Bilthoven, Netherlands**

Netherlands

3721

**Study participating centre**

**Oxford, UK**

United Kingdom

OX1 2JD

**Study participating centre**

**Norfolk, UK**  
United Kingdom  
NR31 0ED

**Study participating centre**  
**Heidelberg, Germany**  
Germany  
69120

**Study participating centre**  
**Potsdam, Germany**  
Germany  
14558

**Study participating centre**  
**Asturias, Spain**  
Spain  
33005

**Study participating centre**  
**Guipuzcoa, Spain**  
Spain  
20013

**Study participating centre**  
**Navarra, Spain**  
Spain  
31003

**Study participating centre**  
**Murcia, Spain**  
Spain  
30003

**Study participating centre**

**Granada, Spain**

Spain

18011

**Study participating centre**

**Turin, Italy**

Italy

10126

**Study participating centre**

**Milan, Italy**

Italy

20133

**Study participating centre**

**Florence, Italy**

Italy

50139

**Study participating centre**

**Naples, Italy**

Italy

80138

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**Ragusa, Italy**

Italy

97100

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**Study participating centre**



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## Sponsor information

### Organisation

International Agency for Research on Cancer

### Sponsor details

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### Sponsor type

Research organisation

### ROR

<https://ror.org/00v452281>

## Funder(s)

### Funder type

Research organisation

### Funder Name

Institut National du Cancer, Paris (INCa)

### Funder Name

Wereld Kanker Onderzoek Fonds (WCRF)

### Funder Name

Hellenic Health Foundation

## Results and Publications

Publication and dissemination plan

Publication in peer reviewed journal.

### Intention to publish date

31/12/2017

### Individual participant data (IPD) sharing plan

The complete procedure used to estimate polyphenol intakes will be published in the form of a methodological manuscript and with that the EPIC polyphenol database will be made available as an online supplement. Additionally, the following link can be consulted for further details regarding access to the EPIC data: [https://epic.iarc.fr/docs/EPIC\\_Access\\_Policy\\_and\\_Guidelines.pdf](https://epic.iarc.fr/docs/EPIC_Access_Policy_and_Guidelines.pdf)

### IPD sharing plan summary

Other

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results:	01/09/2018		Yes	No