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### **Large study finds aspirin use associated with reduced risk of dying from cancer**

The results of one of the largest studies to date examining aspirin and cancer risk, presented at the annual meeting of the American Association for Cancer Research on April 16, 2007, found that regular use of aspirin, a nonsteroidal anti-inflammatory drug (NSAID), was associated with a reduction of the incidence of cancer as well as a reduced risk of dying from the disease.

Mayo Clinic researchers evaluated data from 22,507 postmenopausal participants in the Iowa Women's Health Study who provided information on their NSAID use and were free of cancer upon enrollment. Women who reported regular aspirin use experienced a 16 percent lower risk of developing cancer and a 13 percent lower risk of dying of cancer compared to nonusers. There was no association found between cancer incidence and mortality and the use of other NSAIDs. Adjustment of the analysis for numerous lifestyle factors failed to significantly alter the finding. The protective effect of aspirin was not observed among active smokers.

Aspirin and other NSAIDs inhibit cyclooxygenase (COX) enzymes responsible for prostaglandin formation that causes inflammation and may stimulate cancer growth. "While chemically different, these agents share at least one similar mechanism of action so you might have expected them to have comparable effects," senior author Jon Ebbert, MD noted.

Most studies involving aspirin and cancer have focused on a specific cancer type. "This study is unique because we were able to evaluate comprehensive endpoints such as total cancer incidence and cancer mortality, which are more clinically relevant outcomes for patients," lead author Aditya Bardia, MD noted.

"This is just one study," Dr Bardia stated. "However, it does provide provocative evidence that regular aspirin use may play a role in preventing the most common chronic diseases in western countries, namely cancer and heart disease."

Health Concern

### **Chronic inflammation**

Aging results in an increase of inflammatory cytokines (destructive cell-signaling chemicals) that contribute to the progression of many degenerative diseases (Van der Meide et al. 1996; Licinio et al. 1999). Rheumatoid arthritis is a classic autoimmune disorder in which excess levels of cytokines such as tumor necrosis factor-alpha (TNF-a), interleukin-6 (IL-6), interleukin 1b [IL-1 (b)], and/or interleukin-8 (IL-8) are known to cause or contribute to the inflammatory syndrome (Deon et al. 2001).

Chronic inflammation is also involved in diseases as diverse as atherosclerosis, cancer, heart valve dysfunction, obesity, diabetes, congestive heart failure, digestive system diseases, and Alzheimer's disease (Brouqui et al. 1994; Devaux et al. 1997;

De Keyser et al. 1998). In aged people with multiple degenerative diseases, the inflammatory marker, C-reactive protein, is often sharply elevated, indicating the presence of an underlying inflammatory disorder (Invitti 2002; Lee et al. 2002; Santoro et al. 2002; Sitzer et al. 2002). When a cytokine blood profile is conducted on people in a weakened condition, an excess level of one or more of the inflammatory cytokines, e.g., TNF-a, IL-6, IL-1(b), or IL-8, is usually found (Santoro et al. 2002).

Those who are in relative good health, but have elevated C-reactive protein, can try to lower it using a variety of diet modifications, supplements and/or drugs. Supplements such as vitamin E, borage oil, fish oil, DHEA, vitamin K and nettle leaf extract can lower C-reactive protein. Diets low in arachidonic acid, omega-6 fatty acids, saturated fats, high-glycemic food and overcooked food can suppress inflammatory factors in the body.

If diet and supplements fail, drugs such as ibuprofen, aspirin, pentoxifylline or one of the statins (such as Pravachol®) should be tried.

<http://www.lef.org/protocols/prtcl-146.shtml>

## Featured Products

### Low Dose Aspirin (Enteric Coated)

Numerous studies document the multiple health benefits of daily low dose aspirin. Aspirin helps to maintain normal platelet aggregation in blood vessels and the production of prostaglandin E2 and possibly C-reactive protein.

Ask your physician if low dose aspirin is right for you.

<http://www.lef.org/newshop/items/item00892.html>



### Cytokine Panel

This panel is used to identify elevated levels of specific cytokines. Cytokines are critical early mediator of the inflammatory and overall immune response and as such, are believed to play an important role in the development of pathological conditions which result in chronic inflammation, septic shock, and hematopoietic defects. While inflammation is an important homeostatic mechanism that limits the effects of infectious agents, inflammation itself has the potential for inducing damage. The following tests are included in this panel: IL1b, IL6, IL8, and TNF-a.



<http://www.lef.org/newshop/items/itemLCCYT.html>

## Life Extension

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During our annual Blood Test Super Sale, members save 80% compared to the retail prices charged by commercial blood testing labs. Our blood testing service is designed for your maximum convenience, and you'll experience significant savings in the process. Sale ends May 31, 2007.

<http://www.lef.org/bloodtest/index.html>

If you have questions or comments concerning this issue or past issues of *Life Extension Update*, send them to [dye@lifeextension.com](mailto:dye@lifeextension.com) or call 954 202 7716.

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