

Diet and blood pressure – a role for dairy?

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Hypertension

• Definition and prevalence



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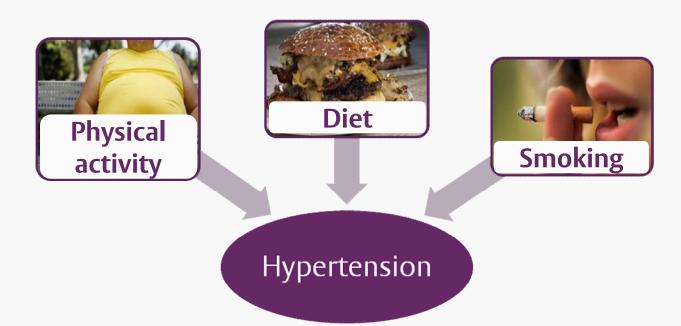
Hypertension

• Definition and prevalence



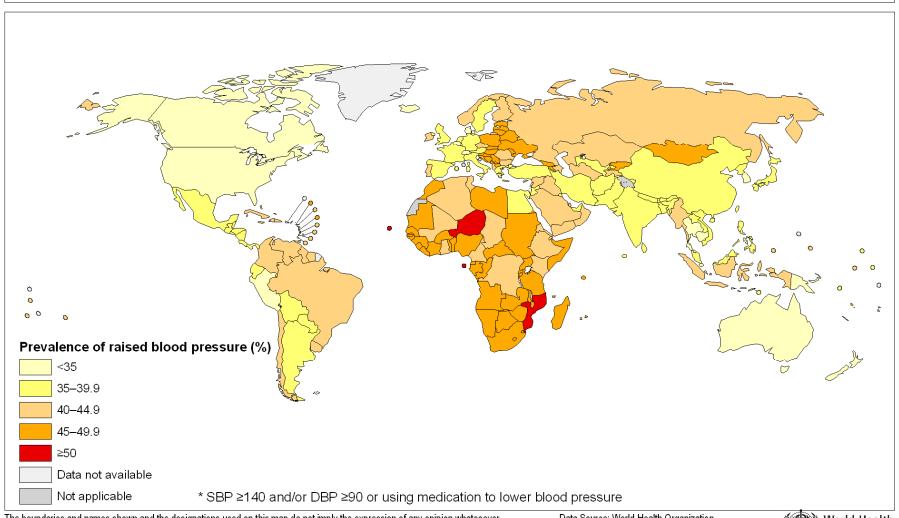
Definition of hypertension

Systolic blood pressure (SBP) ≥140 mm Hg or
Diastolic blood pressure (DBP) ≥ 90 mm Hg or
Use of anti-hypertensive medication



Hypertension – definition and prevalence

Prevalence of raised blood pressure*, ages 25+, age standardized Both sexes, 2008



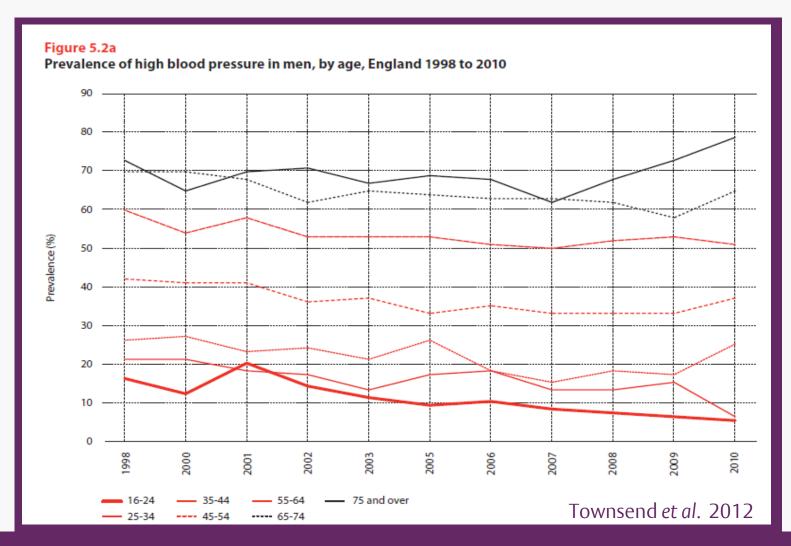
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Data Source: World Health Organization Map Production: Public Health Information and Geographic Information Systems (GIS) World Health Organization



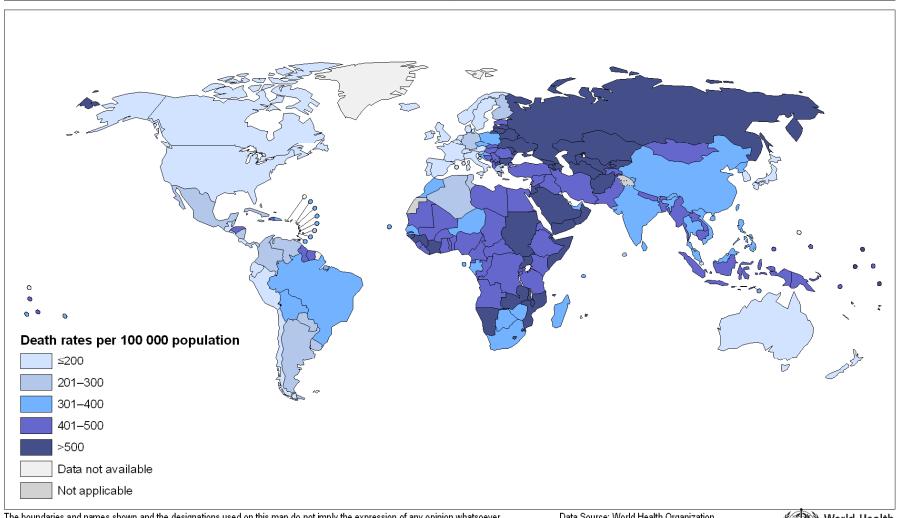


Hypertension in the UK



Hypertension – definition and prevalence

Cardiovascular diseases and diabetes, death rates per 100 000 population, age standardized Males, 2008



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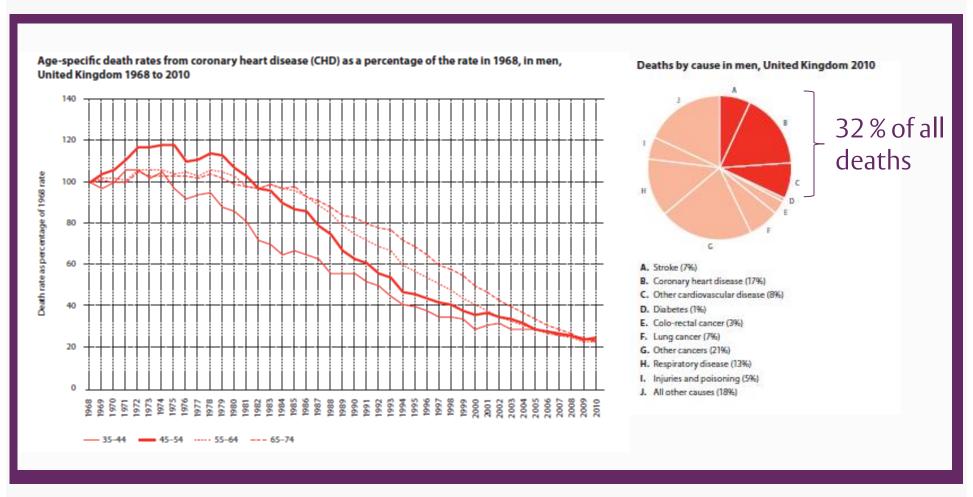
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Cardiovascular disease in the UK



Townsend et al. 2012

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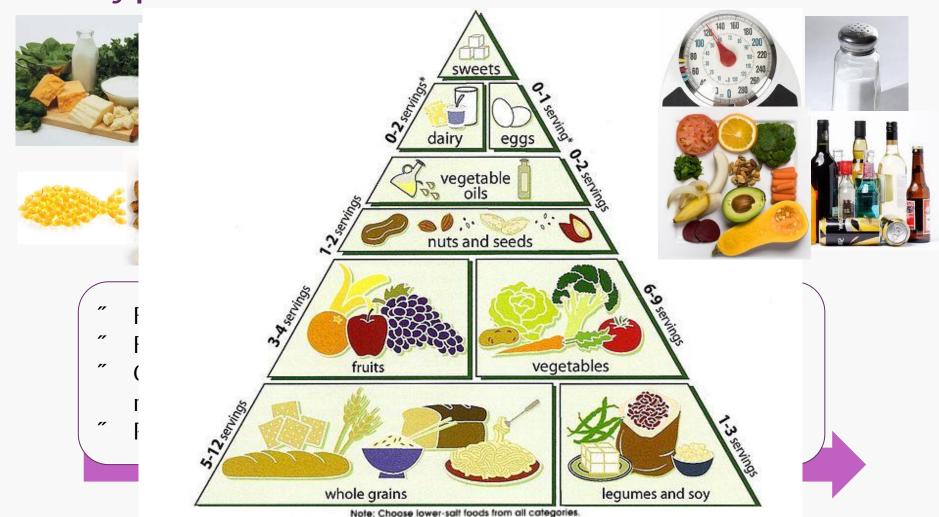


Hypertension

"Role of diet



Hypertension - role of diet



Appel et al. J Am Soc Hypertens. 2010

Hypertension – role of diet







Diet and blood pressure: clinical trial

The New England Journal of Medicine

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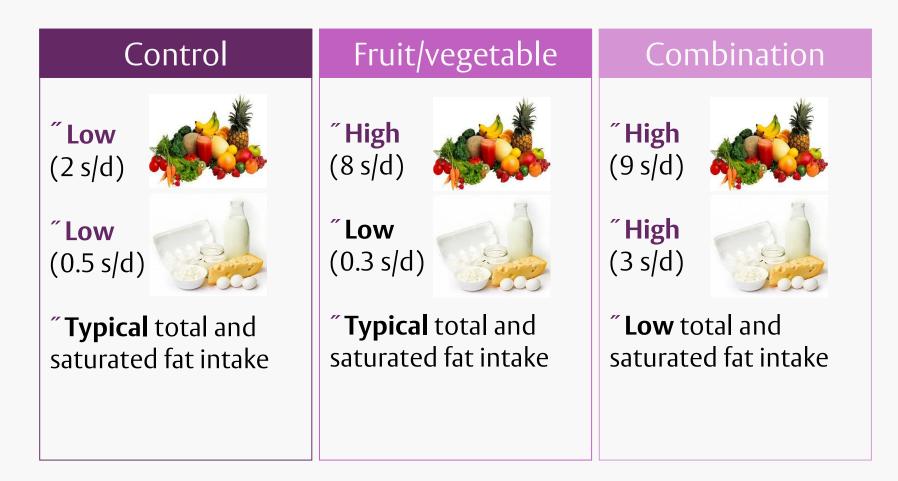
A CLINICAL TRIAL OF THE EFFECTS OF DIETARY PATTERNS ON BLOOD PRESSURE

LAWRENCE J. APPEL, M.D., M.P.H., THOMAS J. MOORE, M.D., EVA OBARZANEK, PH.D., WILLIAM M. VOLLMER, PH.D., LAURA P. SVETKEY, M.D., M.H.S., FRANK M. SACKS, M.D., GEORGE A. BRAY, M.D., THOMAS M. VOGT, M.D., M.P.H., JEFFREY A. CUTLER, M.D., MARLENE M. WINDHAUSER, PH.D., R.D., PAO-HWA LIN, PH.D., AND NJERI KARANJA, PH.D., FOR THE DASH COLLABORATIVE RESEARCH GROUP*

Appel et al. N Engl J Med. 1997



Dietary patterns and blood pressure: diets



Appel et al. N Engl J Med. 1997

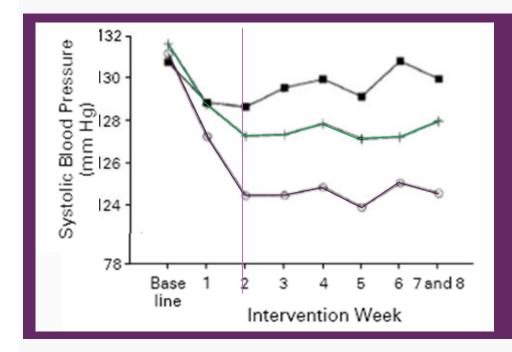


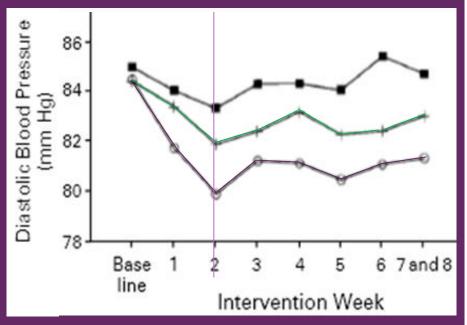
Clinical trial results

- Control diet
- + Fruits-and-vegetables diet
- → Combination diet







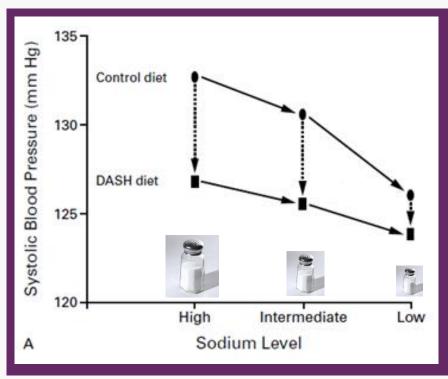


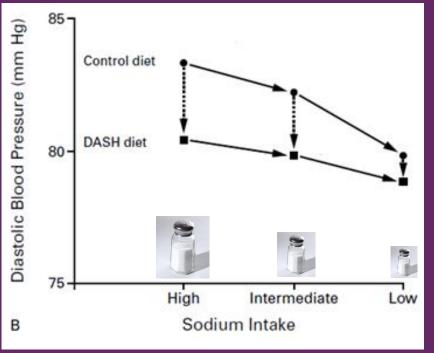
Appel et al. N Engl J Med. 1997



Follow up study: DASH II

• High sodium (150 mmol/d), intermediate (100 mmol/d) or low (50 mmol/d)





Sacks et al. N Engl J Med. 2001

Hypertension – role of diet





Welcome to your preview of The Times

The DASH diet: the weight-loss plan approved by doctors

Ruby Warrington

Last updated at 12:01AM, November 24 2012

When doctors devised an eating plan to fight high blood pressure, cholesterol and diabetes, weight loss was an added bonus

An eating programme devised by doctors to fight high blood pressure has become the latest weight-loss phenomenon andnamed America's healthiest diet two years in a row.

Beating big-name diet plans such as WeightWatchers and

Atkins, the unsexily named DASH Diet, which stands for "Dietary Approaches to Stop Hypertension", was given the accolade by the respected ranking magazine *US News & World Report* and is the subject of two top-selling diet books this year.



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Hypertension

"Is there a role for dairy products?



Dairy Consumption and Incidence of Hypertension A Dose-Response Meta-Analysis of Prospective Cohort Studies

Sabita S. Soedamah-Muthu,* Lisa D.M. Verberne,* Eric L. Ding, Mariëlle F. Engberink, Johanna M. Geleijnse

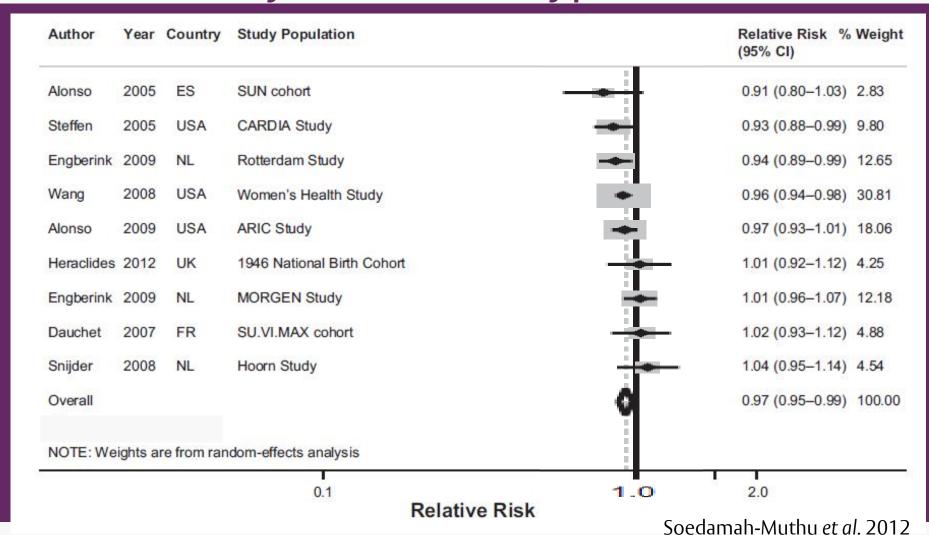
Abstract—Observational and clinical studies suggest that dairy intake, particularly low-fat dairy, could have a beneficial effect on blood pressure. We performed a dose-response meta-analysis of prospective cohort studies on dairy intake and risk of hypertension in the general population. A systematic literature search for eligible studies was conducted until July 2011, using literature databases and hand search. Study-specific dose-response associations were computed according to the generalized least squares for trend estimation method, and linear and piecewise regression models were created. Random-effects models were performed with summarized dose-response data. We included 9 studies with a sample size of 57 256, a total of 15 367 incident hypertension cases, and a follow-up time between 2 and 15 years. Total dairy (9 studies; range of intake, ≈100–700 g/d), low-fat dairy (6 studies; ≈100–500 g/d), and milk (7 studies; ≈100–500 g/d) were inversely and linearly associated with a lower risk of hypertension. The pooled relative risks per 200 g/d were 0.97 (95% CI, 0.95–0.99) for total dairy, 0.96 (95% CI, 0.93–0.99) for low-fat dairy, and 0.96 (95% CI, 0.94–0.98) for milk. High-fat dairy (6 studies), total fermented dairy (4 studies), yogurt (5 studies), and cheese (8 studies) were not significantly associated with hypertension incidence (pooled relative risks of ≈1). This meta-analysis of prospective cohort studies suggests that low-fat dairy and milk could contribute to the prevention of hypertension, which needs confirmation in randomized controlled trials. (Hypertension. 2012;60:1131-1137.) • Online Data Supplement

Key Words: dairy products ■ milk ■ hypertension ■ blood pressure ■ meta-analysis ■ prospective studies

Soedamah-Muthu et al. Hypertension. 2012

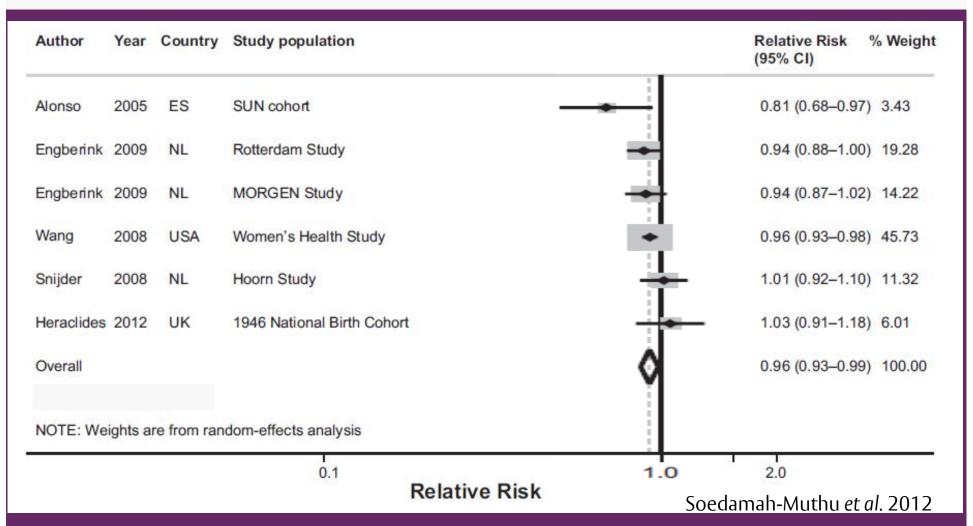


Total dairy intake and hypertension



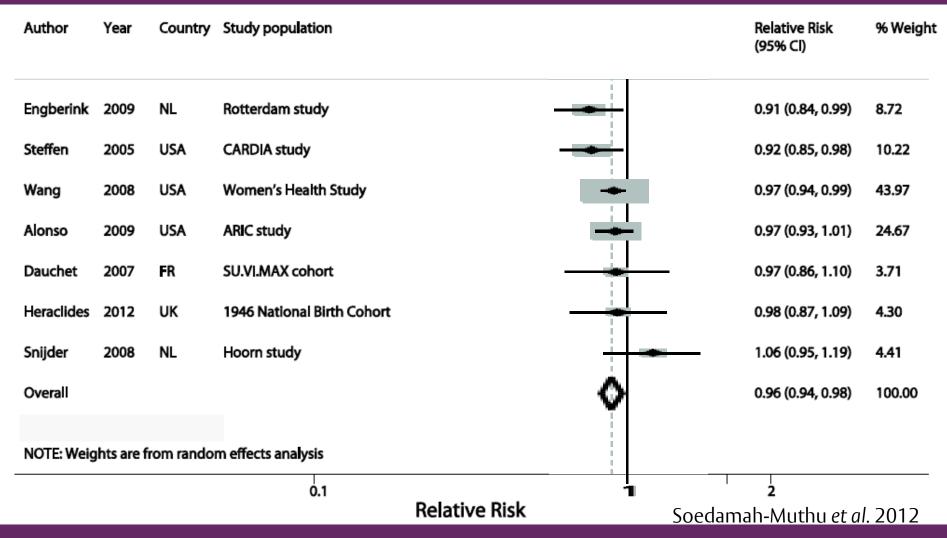


Low-fat dairy intake and hypertension



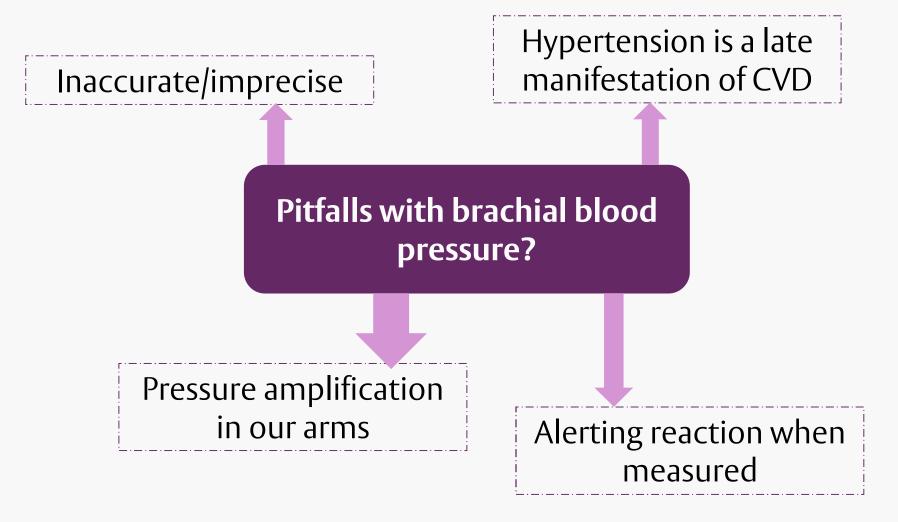


Milk intake and hypertension



Hypertension – role of dairy

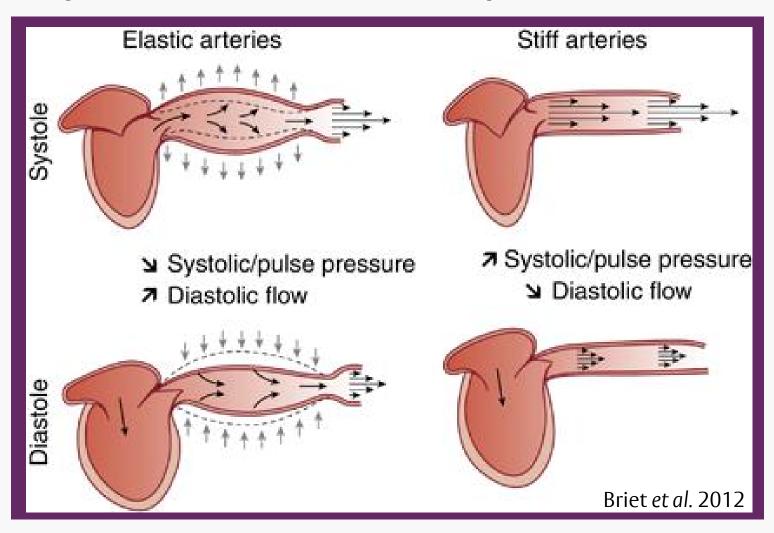




Franklin et al. 2008



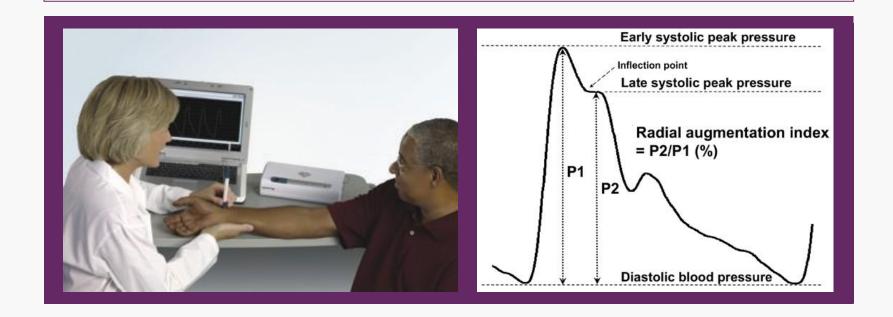
Beyond brachial blood pressure?





Arterial stiffness

Pulse wave velocity and augmentation index are strong, independent predictor of CVD events and all cause mortality (Vlachopoulos et al. 2010; Janner et al., 2012)





Relations Between Dairy Food Intake and Arterial Stiffness Pulse Wave Velocity and Pulse Pressure

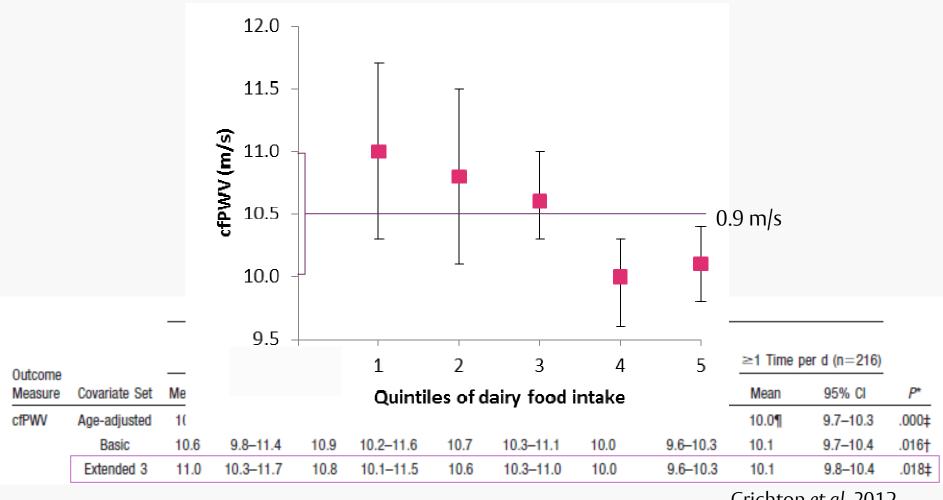
Georgina E. Crichton, Merrrill F. Elias, Gregory A. Dore, Walter P. Abhayaratna, Michael A. Robbins

Abstract—Modifiable risk factors, such as diet, are becomingly increasingly important in the management of cardiovascular disease, one of the greatest major causes of death and disease burden. Few studies have examined the role of diet
as a possible means of reducing arterial stiffness, as measured by pulse wave velocity, an independent predictor of
cardiovascular events and all-cause mortality. The aim of this study was to investigate whether dairy food intake is
associated with measures of arterial stiffness, including carotid-femoral pulse wave velocity and pulse pressure. A
cross-sectional analysis of a subset of the Maine-Syracuse Longitudinal Study sample was performed. A linear decrease
in pulse wave velocity was observed across increasing intakes of dairy food consumption (ranging from never/rarely to
daily dairy food intake). The negative linear relationship between pulse wave velocity and intake of dairy food was
independent of demographic variables, other cardiovascular disease risk factors, and nutrition variables. The pattern of
results was very similar for pulse pressure, whereas no association between dairy food intake and lipid levels was found.
Further intervention studies are needed to ascertain whether dairy food intake may be an appropriate dietary intervention
for the attenuation of age-related arterial stiffening and reduction of cardiovascular disease risk. (Hypertension. 2012;
59:00.) • Online Data Supplement

Key Words: pulse wave velocity ■ arterial stiffness ■ blood pressure ■ dairy food



Dairy intake and Pulse Wave Velocity





Does Dairy Food Intake Predict Arterial Stiffness and Blood Pressure in Men?

Evidence from the Caerphilly Prospective Study

Katherine M. Livingstone, Julie A. Lovegrove, John R. Cockcroft, Peter C. Elwood, Janet E. Pickering, D. Ian Givens

Abstract—Arterial stiffness is an independent predictor of cardiovascular disease events and mortality, and like blood pressure, may be influenced by dairy food intake. Few studies have investigated the effects of consumption of these foods on prospective measures of arterial stiffness. The present analysis aimed to investigate the prospective relationship between milk, cheese, cream, and butter consumption and aortic pulse wave velocity, augmentation index, systolic and diastolic blood pressure, as well as cross-sectional relationships between these foods and systolic and diastolic blood pressure and metabolic markers using data from the Caerphilly Prospective Study. Included in this cohort were 2512 men, aged 45 to 59 years, who were followed up at 5-year intervals for a mean of 22.8 years (number followup 787). Augmentation index was 1.8% lower in subjects in the highest quartiles of dairy product intake compared with the lowest (P trend=0.021), whereas in the highest group of milk consumption systolic blood pressure was 10.4 mm Hg lower (P trend=0.033) than in nonmilk consumers after a 22.8-year follow-up. Cross-sectional analyses indicated that across increasing quartiles of butter intake, insulin (P trend=0.011), triacylglycerol (P trend=0.023), total cholesterol (P trend=0.002), and diastolic blood pressure (P trend=0.027) were higher. Across increasing groups of milk intake and quartiles of dairy product intake, glucose (P trend=0.032) and triglyceride concentrations (P trend=0.031) were lower, respectively. The present results confirm that consumption of milk predicts prospective blood pressure, whereas dairy product consumption, excluding butter, is not detrimental to arterial stiffness and metabolic markers. Further research is needed to better understand the mechanisms that underpin these relationships. (Hypertension. 2013;61:00-00.) • Online Data Supplement

Key Words: dairy products ■ blood pressure ■ aortic pulse wave velocity ■ augmentation index ■ cardiovascular disease

Livingstone et al. Hypertension. 2013, 61, 42-47.



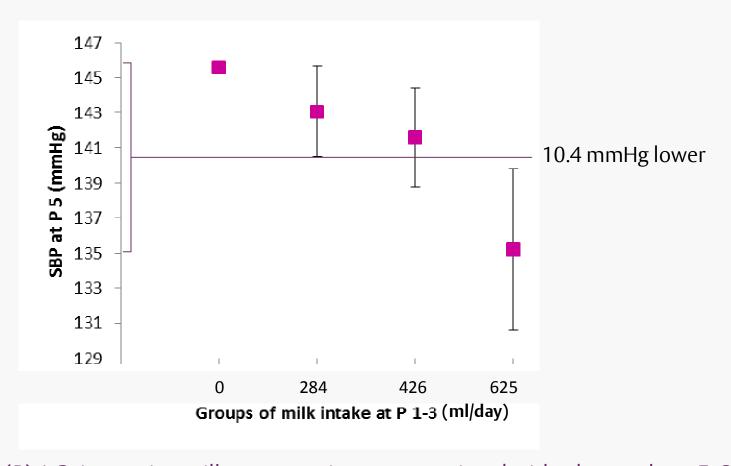
Caerphilly Prospective Study

Subjects	Follow-up	Assessments		
"Phase 1 (P1; 1979)	"5-year intervals for 22.8 ± 1.2 years	"Food frequency questionnaire (FFQ)		
"2,512 men from Wales	″P2 (1984)	"Blood sample		
"Aged 45-59 years	″P3 (1994)	"Blood pressure		
	″P4 (1999)	"Arterial Stiffness:		
	″P5 (2004)	Pulse Wave Velocity/ Augmentation Index		

Livingstone et al. Hypertension. 2013, 61, 42-47.



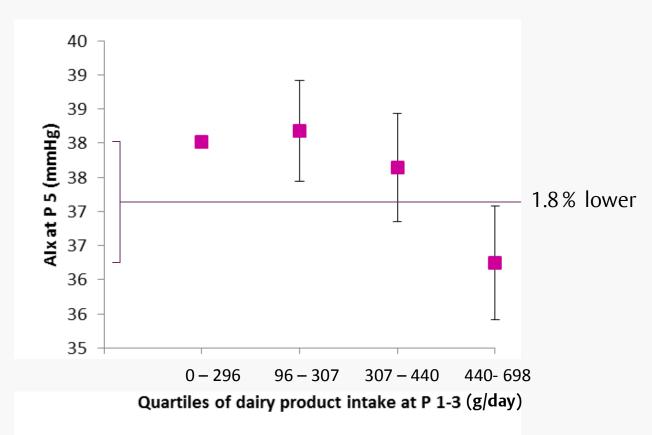
Milk intake predicts Systolic Blood Pressure



At mean phase (P) 1-3, increasing milk consumption was associated with a lower phase 5 SBP (Coefficient: -0.013 ± 0.006 , P trend=0.033) Livingstone et al. Hypertension. 2013, 61, 42-47.



Dairy intake predicts Augmentation Index

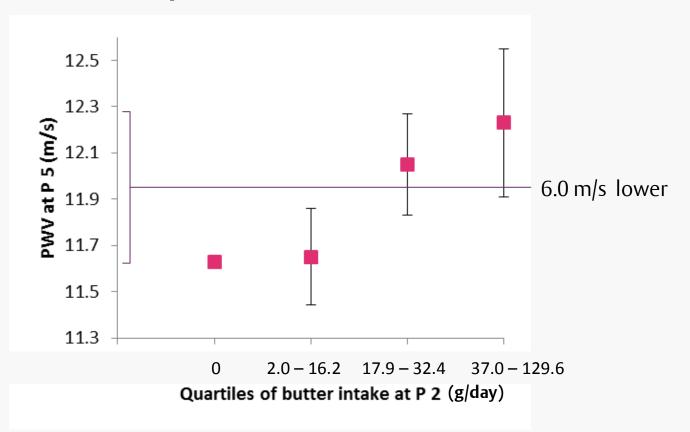


At mean phase (P) 1-3, increasing dairy consumption was associated with a lower phase 5 augmentation index (Coefficient: -0.613 ± 0.266 , P trend=0.021)

Livingstone et al. Hypertension. 2013, 61, 42-47.



Butter intake predict Pulse Wave Velocity



At phase (P) 2, increasing butter consumption was associated with a higher phase 5 pulse wave velocity (Coefficient: 0.211 ± 0.089 , P trend=0.018) Livingstone et al. Hypertension. 2013, 61, 42-47.

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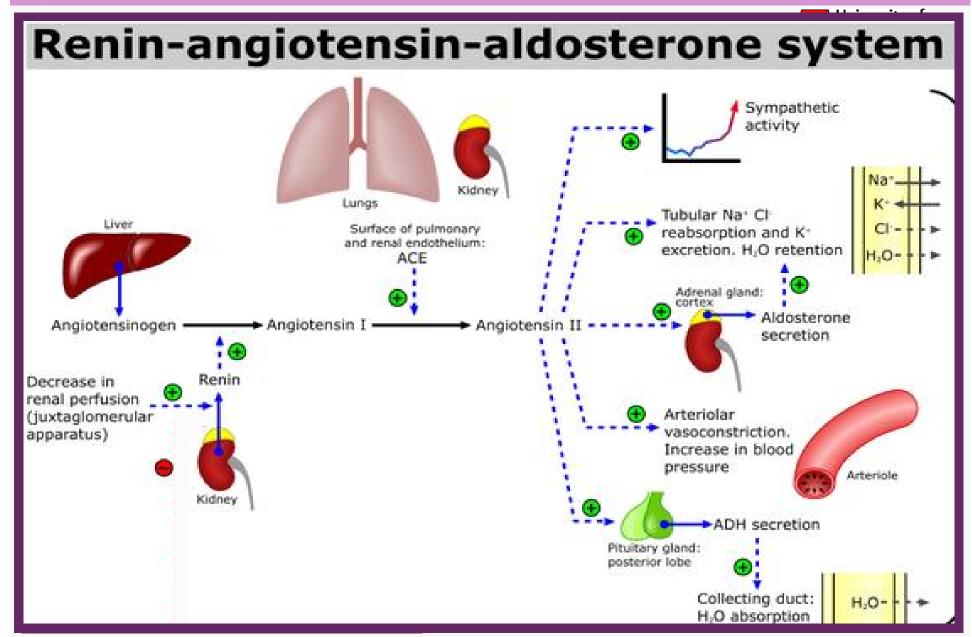




Hypertension

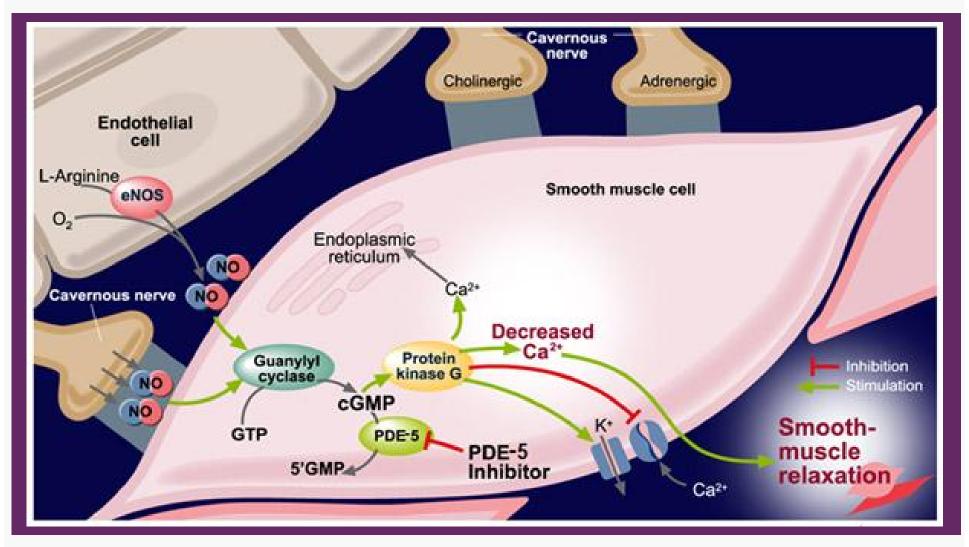
"Potential mechanisms

Hypertension – potential mechanisms



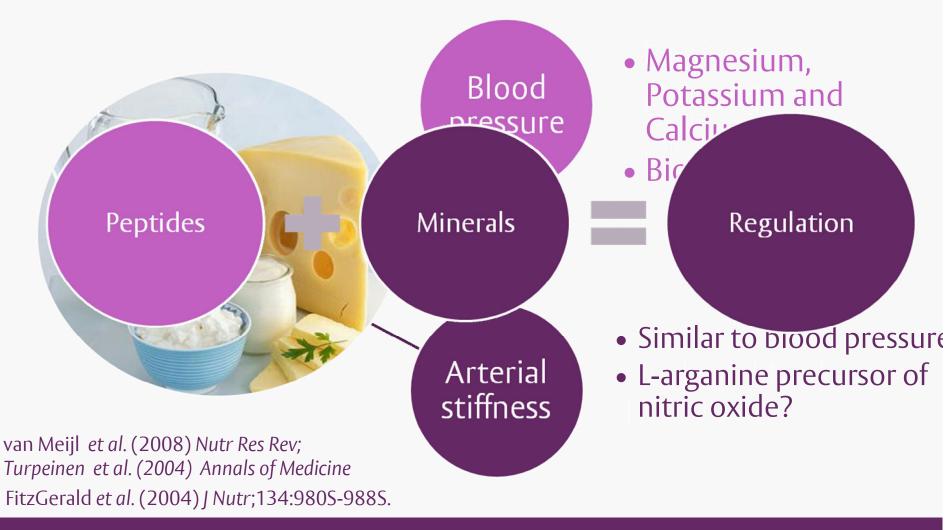
Hypertension – potential mechanisms







Potential mechanisms for dairy





Conclusions



Diet appears to have a role in maintaining a healthy blood pressure

Dairy products lower blood pressure but also arterial stiffness





Dairy products should be incorporated into a health balanced diet



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- Professor Ian Givens
- Professor Chris Reynolds
- Dr. Kirsty Kliem

Collaborators:

- Professor Yoav Ben-Shlomo
- Professor John Cockcroft
- Professor Peter Elwood
- Janet Pickering











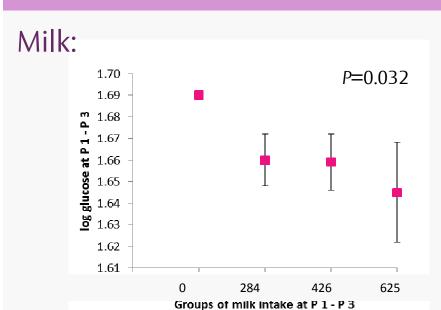
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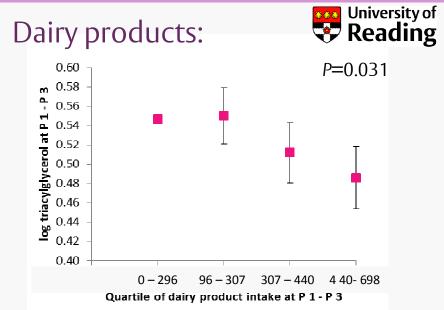


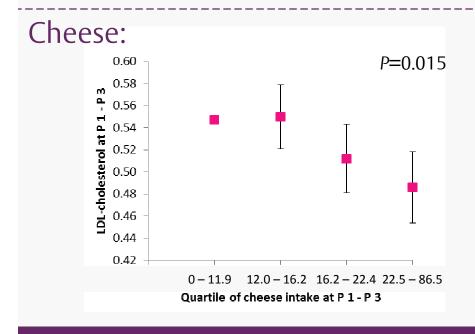
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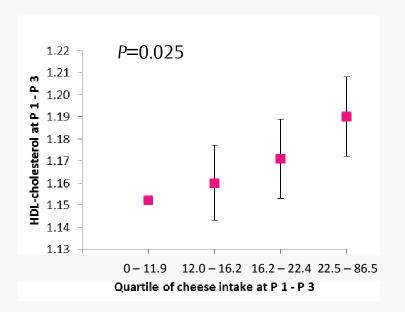


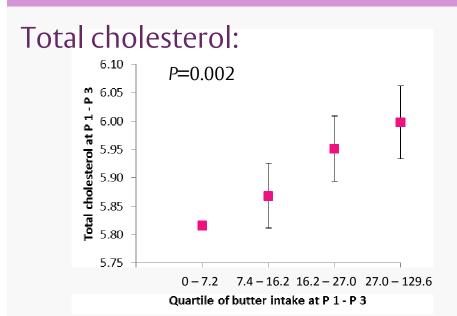
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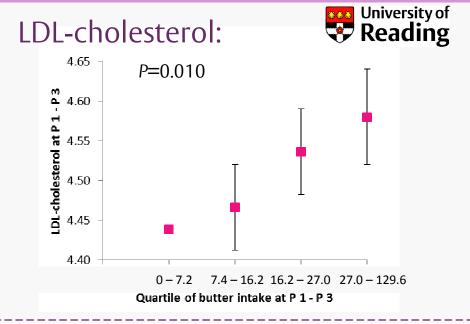


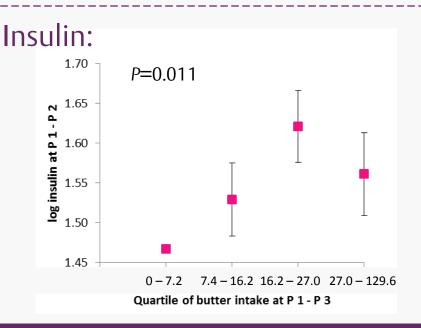


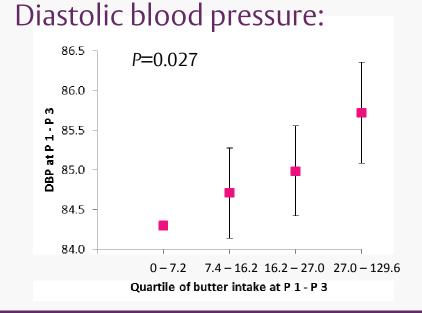














JACC Vol. 55, No. 13, 2010 March 30, 2010:1318-27

Figure 3

Vlachopoulos et al. Arterial Stiffness and Clinical Events 1323

Study characteristics		stics	A Total CV events		B cvr		mortality	; C	All-cause mortality		
Author	Population	RR	95% CI	RR (95% CI)	RR	95% CI	RR (95% CI)	RR	95% CI	RR (95% CI)	
Anderson 2009	GEN							1.15	1.01 - 1.31	l_o_	
Blacher 1999	ESRD	1.17	1.06 - 1.30	-0-	1.17	1.06 - 1.30	- D-	1.17	1.07 - 1.27	-0-	
Cruickshank 2002	DM		******					1.08	1.03 - 1.12		
Laurent 2001	HTN	1.09	1.02 - 1.16		1.09	1.02 - 1.16	-C-	1.06	1.01 - 1.16		
Meaume 2001	GEN	1.19	1.03 - 1.37	— 	1.19	1.03 - 1.37		1.00			
Pannier 2005	ESRD	1.12	1.03 - 1.22	- -	1.12	1.03 - 1.22					
Shoji 2001	ESRD	1.18	1.01 - 1.39		1.18	1.01 - 1.39	<u> </u>	1.15	1.03 - 1.29		
Shokawa 2005	GEN	1.35	1.13 - 1.61		1.35	1.13 - 1.61		1.28	1.16 - 1.41		
Sutton-Tyrrell 2005	GEN	1.03	1.01 - 1.06		1.03	1.01 - 1.06		1.05	1.02 - 1.08	Η	
Wang 2010 (men)	GEN	1.21	1.10 - 1.33	_ -	1.21	1.10 - 1.33	-0-	1.19	1.13 - 1.26	<u> </u>	
Wang 2010 (women) GEN	1.30	1.20 - 1.42	-	1.30	1.20 - 1.42		1.25	1.19 - 1.32		
Willum-Hansen 200	6 GEN	1.05	1.01 - 1.08		1.06	1.01 - 1.11		1.20	1.15 - 1.52	"	
Zoungas 2007	ESRD	1.14	1.07 - 1.22	<u></u>							
Overall		1.14	1.09 - 1.20	•	1.15	1.09 - 1.21	•	1.15		•	
		0.5		1 2	0.5		1	2 0.5		1 3	
		Test for heterogeneity: I ² =81.1%, P<0.001 Test for overall effect: Z=5.43, P<0.001			Test for heterogeneity: I ² =81.3%, P<0.001 Test for overall effect: Z=4.88, P<0.001				Test for heterogeneity: I ² =85.5%, P<0.001 Test for overall effect: Z=5.00, P<0.001		

RR and 95% CI for a 1-m/s increase in aortic PWV and total CV events (A), CV mortality (B),

and all-cause mortality (C). Studies are listed alphabetically. Symbols and abbreviations as in Figure 2.

RR and 95% CI for a 1-m/s Increase in Aortic PWV and Clinical Events