

Fitness level associated with lower risk of some cancers, death in men

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Men with a high fitness level in midlife appear to be at lower risk for lung and colorectal cancer, but not prostate cancer, and that higher fitness level also may put them at lower risk of death if they are diagnosed with cancer when they're older, according to a study published online by *JAMA Oncology*.

While the association between cardiorespiratory [fitness](#) (CRF) and cardiovascular disease (CVD) has been well-established, the value of CRF as a predictor of primary cancer has gotten less attention, according to background in the study.

Susan G. Lakoski, M.D., M.S., of the University of Vermont, Burlington, and coauthors looked at the association between midlife CRF and incident cancer and survival following a [cancer diagnosis](#) at the Medicare age of 65 or older. The study included 13,949 [men](#) who had a baseline fitness exam where CRF was assessed in a treadmill test. Fitness levels were assessed between 1971 and 2009 and lung, prostate and colorectal cancers were assessed using Medicare data from 1999 to 2009.

During an average 6.5 years of surveillance for the 13,949 men, 1,310 of them were diagnosed with prostate cancer, 200 with lung cancer and 181 men with colorectal cancer.

The authors found that high CRF in midlife was associated with a 55 percent lower risk of [lung cancer](#) and a 44 percent lower risk of [colorectal cancer](#) compared to men with low CRF. However this same association was not seen between midlife CRF and prostate cancer, and authors note the exact reasons for this are unknown, although they speculate men with high CRF may be more prone to undergo preventive screenings and therefore have a greater opportunity to be diagnosed with prostate cancer.

The study also found that high CRF in midlife was associated with a 32 percent lower risk for cancer death among men who developed lung, colorectal or [prostate cancer](#) at Medicare age compared with men with low CRF. And, high CRF in midlife was associated with a 68 percent reduction in CVD death compared with low CRF among men who developed cancer.

"To our knowledge, this is the first study to demonstrate that CRF is predictive of site-specific cancer incidence, as well as risk of death from cancer or CVD following a cancer diagnosis. These findings provide further support for the effectiveness of CRF assessment in preventive health care settings. Future studies are required to determine the absolute level of CRF necessary to prevent site-specific cancer as well as evaluating the long-term effect of [cancer](#) diagnosis and mortality in women," the study concludes.

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