

# Reducing processed meat intake could have significant health benefits, study suggests

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Reducing consumption of processed meat by around one-third could prevent more than 350,000 cases of diabetes in the US over 10 years, a study suggests. Cutting US adults' processed meat intake by 30%—the equivalent of around 10 slices of bacon a week—would also lead to tens

of thousands of fewer cases of cardiovascular disease and colorectal cancer, researchers say.

A team from the University of Edinburgh's Global Academy of Agriculture and Food Systems together with the University of North Carolina, Chapel Hill, has developed a simulation tool to estimate the [health impacts](#) of reducing consumption of processed meat and [unprocessed red meat](#).

While many studies have identified links between high levels of processed meat consumption and chronic disease, few have evaluated the impact on multiple health outcomes. Some previous research also suggests unprocessed red meat may contribute to chronic disease risk but evidence is still limited.

The researchers used data from a Centers for Disease Control and Prevention (CDC) national health survey to create a simulated, representative sample of the US [adult population](#)—a so-called microsimulation.

Their microsimulation is the first to estimate the effects of reducing processed meat and unprocessed red meat consumption—from between 5 and 100%—on multiple health outcomes in the US.

The team estimated how changes in meat consumption affect adults' risk of diabetes, [cardiovascular disease](#), colorectal cancer and death. The effects were evaluated in the overall population and separately based on age, sex, household income and ethnicity.

As well as preventing more than 350,000 cases of diabetes, cutting processed [meat intake](#) by 30% would lead to 92,500 fewer cardiovascular disease cases and 53,300 fewer colorectal cancer cases over a decade, researchers say.

In this scenario, [white males](#) and those with an annual household income between \$25,000 and \$55,000 were found to experience the greatest health benefits.

Researchers also analyzed the impacts of reducing unprocessed red meat intake alone and cutting consumption of both processed meat and unprocessed red meat.

Reducing consumption of both by 30% resulted in 1,073,400 fewer diabetes cases, 382,400 fewer cardiovascular disease cases and 84,400 fewer colorectal cancer cases.

Cutting unprocessed red meat intake alone by 30%—which would mean eating around one less quarter-pound beef burger a week—resulted in more than 732,000 fewer diabetes cases. It also led to 291,500 fewer cardiovascular disease cases and 32,200 fewer [colorectal cancer](#) cases.

The finding that more disease cases were prevented by reducing unprocessed red meat compared to processed meat is partly due to the average daily intake of unprocessed red meat being higher than processed meat, at 47g a day versus 29g a day, respectively.

As less is known about the effect of eating unprocessed red meat on chronic disease risk, the team says these estimates should be interpreted with caution and that more research is needed.

The study is published in *The Lancet Planetary Health*.

Professor Lindsay Jaacks, Personal Chair of Global Health and Nutrition at the University of Edinburgh, and one of the authors of the study, said, "Cutting consumption of meat has been recommended by national and [international organizations](#) to reduce [greenhouse gas emissions](#), including the Climate Change Committee here in the UK and the United Nations

Intergovernmental Panel on Climate Change or IPCC.

"Our research finds that these changes in diets could also have significant health benefits in the US, and so this is a clear win-win for people and planet."

**More information:** Joe Kennedy et al, Estimated effects of reductions in processed meat consumption and unprocessed red meat consumption on occurrences of type 2 diabetes, cardiovascular disease, colorectal cancer, and mortality in the USA: a microsimulation study, *The Lancet Planetary Health* (2024). DOI: 10.1016/S2542-5196(24)00118-9 , [www.thelancet.com/journals/lan ... \(24\)00118-9/fulltext](http://www.thelancet.com/journals/lan ... (24)00118-9/fulltext)

Provided by University of Edinburgh

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