Tomato/Tomato-based foods and Disease Risk
Ovarian Cancer Critical Findings

Disease type	First Author	Study Title and Complete Citation	Date	Abstract	Study Type	G.Tom +, N, -	P.Tom +, N, -	F.Tom +, N, -	Lyco +, N, -	Other +, N, -	
Cancer: ovarian	Gallus S	Pizza consumption and the risk of breast, ovarian and prostate cancer. Gallus S, Talamini R, Bosetti C, Negri E, Montella M, Franceschi S, Giacosa A, La Vecchia C. Eur J Cancer Prev. 2006 Feb;15(1):74-6.	2006	Pizza has been favourably related to the risk of prostate cancer in North America. Scanty information, however, is available on sex hormone-related cancer sites. We therefore studied the role of pizza consumption on the risk of breast, ovarian and prostate cancers using data from three hospital-based case-control studies conducted in Italy between 1991 and 2002. These included 2569 women with breast cancer, 1031 with ovarian cancer, 1294 men with prostate cancer, and a total of 4864 controls. Compared with non-pizza eaters, the multivariate odds ratios for eaters were 0.97 (95% confidence interval (CI) 0.86-1.10) for breast, 1.06 (95% CI 0.89-1.26) for ovarian and 1.04 (95% CI 0.88-1.23) for prostate cancer. Corresponding estimates for regular eaters (i.e. > or =1 portion per week) were 0.92 (95% CI 0.78-1.08), 1.00 (95% CI 0.80-1.25) and 1.12 (95% CI 0.88-1.43), respectively. Our results do not show a relevant role of pizza on the risk of sex hormone-related cancers. The difference with selected studies from North America suggests that dietary and lifestyle correlates of pizza eating vary between different populations and social groups.	CC		N				
Cancer: ovarian	Kiani F	Dietary risk factors for ovarian cancer: the Adventist Health Study (United States). Kiani F, Knutsen S, Singh P, Ursin G, Fraser G. Cancer Causes Control.	2006	Few prospective studies have reported dietary risk factors for ovarian cancer. A total of 71 histologically confirmed epithelial ovarian cancers occurred among 13,281 non-Hispanic white California Seventh-day Adventist women during follow-up. Participants were part of the Adventist Health Study (AHS) and had no history of cancer or hysterectomy at baseline in 1976 when they completed a detailed lifestyle questionnaire including a dietary assessment. The association of dietary variables with either all ovarian cancer cases or postmenopausal cases was tested using proportional hazards regression with adjustment for age and other covariates. The strongest hazardous risk factor associations among the food variables were found for meat intake	PC	(-)					

		2006 Mar;17(2):137-46.		with a risk ratio (RR) of 2.42 for intake > or = 1 time/week versus no meat (p for trend = 0.006), and cheese intake with a RR of 2.02 for intake of > 2 time/week versus < 1 per week (p for trend = 0.10), both of these being in postmenopausal cases. We found significantly reduced risk of all ovarian cancer with higher tomato consumption (RR = 0.32) comparing intakes > or = five times/week versus never to < 1 time/week (p for trend = 0.002), and also with higher fruit consumption (p < 0.01). A weak protective association was found with low fat, but not whole milk. Little confounding was observed between these foods.