



Table 4-C-III-1 Summary of Findings

Studies Examining the Combinations of Food Intake (Assessed Using Reduced Rank Regression) Explain the Most Variation in Risk of CVD

Study (Quality Rating) Study Design; Location	Study Description	Response Variables	Dietary Patterns	Results
<p>Drogan, 2007</p> <p>Positive Quality</p> <p>Prospective Cohort</p> <p>EPIC Nutrition-Potsdam Cohort</p> <p>Germany</p>	<p>To examine the association between a food pattern predictive for prospective weight change and risk of CVD.</p>	<p>Total fat</p> <p>Total carbohydrate</p> <p>Fiber</p>	<p>Pattern 1</p> <p>(+) Whole-grain bread, fresh fruit, fruit juices, grains (cereals), raw vegetables</p> <p>(-) Processed meat, butter, high-fat cheese, margarine, meat (other than poultry)</p>	<p>During follow-up there were 379 incident cases of non-fatal CVD (MI, N=201; stroke, N=178), including 68 fatal CVD events (MI, N=41; stroke, N=27).</p> <p>Non-fatal CVD risk: NS; no relationship between dietary pattern and non-fatal CVD risk</p> <p>Fatal CVD risk: Compared to Quartile 1, risk of fatal CVD was decreased by 70% in Quartile 3 and 50% in Quartile 4 (P_{trend}=0.016)</p> <p>Quartile 1 vs. Quartile 3: HR=0.31, 95% CI: 0.13 to 0.74</p> <p>Quartile 1 vs. Quartile 4: HR=0.47, 95% CI: 0.20 to 0.91</p>
<p>Heroux, 2009</p> <p>Positive Quality</p> <p>Prospective Cohort</p> <p>ACLS Cohort</p> <p>United States</p>	<p>To examine the relationship between dietary patterns with mortality risk from all-cause and CVD, as well as examine the combined effects of dietary patterns and fitness on mortality risk.</p>	<p>BMI</p> <p>Mean arterial pressure</p> <p>Total cholesterol</p> <p>HDL-cholesterol</p> <p>Triglycerides (mg per dL)</p> <p>Fasting glucose</p> <p>Uric acid</p> <p>White blood cell count</p>	<p>Pattern 1</p> <p>(+) Processed and red meat, white potato products, non-whole grains, added fat and reduced consumption of non-citrus fruits</p>	<p>During follow-up, there were 136 CVD deaths.</p> <p>CVD mortality: NS; no relationship between dietary pattern score and CVD mortality</p>



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McNaughton, 2009 Positive Quality Prospective Cohort Whitehall II Cohort United Kingdom	To examine the relationship between dietary patterns associated with blood lipid levels and risk of incident coronary events.	Total cholesterol HDL-cholesterol Triglycerides	Pattern 1 (+) White bread, fried potatoes, sugar in tea and coffee, burgers, and soft drinks; (+) salad dressings and vegetables Pattern 2: (+) Red meat, cabbage, Brussels sprouts, and cauliflower (-) Whole-meal bread, jam, marmalade, tofu, buns, cakes, pastries, fruit pies and margarine	After 83,536 person-years of follow-up, there were 243 incident CHD events. Pattern 1: Compared to Quartile 1, risk of CHD was increased by 57% in Quartile 4 (P=0.003). Quartile 1 vs. Quartile 4: HR=1.57, 95% CI: 1.08 to 2.27 Pattern 2: NS; no relationship between Pattern 2 and CHD risk in the fully adjusted model (after adjusting for BMI, BP)
Meyer, 2011 Positive Quality Prospective Cohort MONICA Cohort Germany	To examine dietary patterns associated with inflammatory markers and to examine their impact on the incidence of coronary heart disease (CHD) and all-cause mortality.	C-reactive protein Interleukin IL-6 Interleukin IL-18	Pattern 1 (+) Intake of diets rich in meat and beer and low in fresh and cooked vegetables, fresh fruit, whole-meal bread, cereals and muesli, curd, nuts, sweet bread spread and tea identified with higher risk for CHD	During follow-up, there were 101 cases of incident CHD and 88 cases of CHD mortality. CHD and CHD mortality: NS; no relationship between dietary pattern score and CVD mortality in the fully adjusted model (after adjusting for smoking status)