



Fried food consumption and cardiovascular mortality



A study was conducted to examine the association between total and individual food consumption with all-cause and cause-specific mortality in women in the US.

Several studies conducted previously have shown that higher consumption of fried food is associated with an increased risk of cardiovascular disease and type 2 diabetes, the two leading causes of death today. On the other hand, a Mediterranean study found no such association.

In order to gain more clarity, a study was conducted to further examine this association. The study included 106,966 menopausal women aged 50-79 years enrolled in the Women's Health Initiative. Diet was measured at baseline through a self-administered food frequency questionnaire. The questionnaire included 122 composite and single food line items, and the participants were asked to state the frequency of consumption and portion size. 19 questions were related to the type of fat intake. For the purpose of this study, total fried food consumption was the total consumption of fried chicken, fried fish/shellfish, and other fried foods.

Women with more frequent total fried food consumption were more likely to be younger, non-white, less educated and on a lower income. They were also more likely to be smokers, coffee drinkers, have lower physical activity levels and lower diet quality with less intake of vegetables, fruits, and whole grains and more intake of sugar-sweetened beverages, nuts, and legumes, red and processed meat, trans fat, polyunsaturated fatty acid, and sodium. In addition, these women were more likely to have diabetes and a higher body mass index but less likely to have cardiovascular disease at baseline.

Findings show that participants with more frequent total fried food consumption had a higher risk of all-cause mortality. With respect to specific fried food items, fried chicken consumption was associated with a higher risk of all-cause mortality. Fried fish/shellfish consumption of at least one serving per week was associated with a higher risk of all-cause mortality. Other fried food consumption was not associated with all-cause mortality.

Total fried food consumption of at least one serving per day was associated with a modestly higher but not significant risk of cardiovascular mortality. Both fried chicken consumption and fried fish/shellfish consumption of at least one serving per week were associated with a higher risk for cardiovascular mortality.

Overall, this study shows that total and specific fried food consumption is associated with all-cause and cardiovascular mortality. A significantly positive association of fried food consumption, especially fried chicken and fried fish/shellfish was found with all-cause and cardiovascular mortality. This risk factor is modifiable through lifestyle changes and cooking choices. Reducing the consumption of fried food could have a positive

effect on our overall cardiovascular health.

Source: [BMJ](#)

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