A Lifestyle Blueprint for Long Life

By Salynn BoylesWebMD Medical News/ Reviewed By Brunilda Nazario, MD

Sept. 21, 2004 -- Want to live to be 100? Good genes certainly help, but there is new evidence that the foods you eat and how you live may be every bit as important.

The blueprint for longevity suggested by a new study includes eating a Mediterranean-type diet rich in fruits, vegetables, fish, grains, and nuts and low in animal fat, as well as getting at least 30 minutes of exercise a day, not smoking, and drinking alcohol in moderation.

Elderly Europeans in the study who routinely did all four of these things died at a rate that was more than 50% lower than those who followed none of the low risk factors or just a few. The findings are reported in the Sept. 22/29 issue of the *Journal of the American Medical Association (JAMA)*.

"This stresses the importance of putting all of these lifestyle factors together," says Harvard School of Public Health epidemiology professor Eric B. Rimm, ScD, who co-wrote an editorial accompanying the study. **"Americans tend to focus on diet, and the emphasis is more on losing weight than overall health. We need to broaden our vision in terms of lifestyle choices."**

More Veggies, Less Red Meat

Scores of earlier studies have suggested that eating a so-called Mediterranean diet, exercising, and drinking alcohol in moderation reduces heart disease risk, and smoking is a well-established risk factor for cardiovascular diseases. But few studies have examined these lifestyle components as a group, and even fewer have done so in an elderly population.

The newly reported study included roughly 2,300 apparently healthy European men women aged 70 to 90 who were followed for a decade.

Eating a Mediterranean diet rich in whole grains, fruits, vegetables, legumes, nuts, and olive oil and low in saturated animal fats, trans fats, and highly-processed grains was associated with a 23% lower risk of death. Drinking alcohol in moderation was associated with a 22% lower risk, exercising 30 minutes or more a day lowered risk by 37%, and not smoking lowered risk by 35%.

Lack of adherence to this low-risk lifestyle was blamed for 60% of all deaths seen among the study participants, 64% of the deaths from heart disease (heart attacks and angina), 61% of the deaths from cardiovascular diseases (high blood pressure, stroke, and coronary artery disease), and 60% of cancer deaths.

"One of the main messages here is that it is never too late to benefit from following a healthy lifestyle," Rimm tells WebMD. "Even among men and women who were as old as 90, this lifestyle afforded tremendous benefit."

Diet Lowers Metabolic Risk

A separate study reported in the same issue of *JAMA* helps explain the Mediterranean diet's cardio-protective benefit, suggesting that it may inhibit inflammation in blood vessels, which is believed to be a major player in heart disease and type 2 diabetes.

Patients at high risk for these diseases who followed the Mediterranean diet for two years showed more improvements in weight loss, blood pressure, cholesterol, and insulin resistance -- conditions that promote heart disease -- than a similar group placed on a conventional diet.

Adherence to the Mediterranean diet was effective in reducing inflammatory blood markers, which have been linked to a high risk of heart disease.

"This study offers some of the first direct evidence showing that this diet is beneficial in terms of reducing insulin resistance or the metabolic syndrome," says Mediterranean diet researcher Dimitrios Trichopoulos, MD, PhD. Trichopoulos reviewed the two studies for WebMD.

"The other study basically confirms what we have reported previously, and we have certainly seen it in Mediterranean populations," he tells WebMD. **"The particular combination of foods in the Mediterranean diet can really work miracles, and combining this way of eating with other healthy lifestyle choices can do even more."**

SOURCES: Knoops, K. and Esposito, K. *The Journal of the American Medical Association*, Sept. 22/29, 2004; vol 292: pp 1433-1439 and 1440-1446. Kim T. B. Knoops, MSc, division of human nutrition, Wagerningen University, Netherlands. Eric B. Rimm, ScD, associate professor of epidemiology and nutrition, Harvard School of Public Health, Boston. Dimitrios Trichopoulos, MD, PhD, professor of epidemiology, Harvard School of Public Health, Boston.