

## EXECUTIVE SUMMARY: Diet, nutrition, physical activity and body weight for people living with and beyond colorectal cancer

The latest evidence, our guidance for patients, carers and health professionals, and recommendations for future research



### Background

Colorectal cancer is the third most commonly diagnosed cancer globally, accounting for 1 in 10 (9.6%) new cancer cases worldwide in 2022. At the same time, progress in early detection and treatment has significantly increased the number of years lived after a diagnosis. Survival rates differ between countries, but worldwide there are an estimated 5 million people living with and beyond colorectal cancer. There is increasing demand for reliable, evidence-based guidance on diet and physical activity from health professionals and people living with and beyond cancer.

This report is from World Cancer Research Fund International's Global Cancer Update Programme (CUP Global) - the world's largest source of scientific research on cancer prevention and survivorship through diet, nutrition, physical activity and body weight. The research in this report builds on the 2018 report "Survivors of breast and other cancers" which was published as part of the Third Expert Report produced by WCRF/AICR on Diet, Nutrition, Physical Activity and Cancer: a Global Perspective. At that time, research on cancer survival was limited, but there was enough evidence to conclude that people living with and beyond cancer should follow our Cancer Prevention

Recommendations. These outline an integrated pattern of behaviours that the evidence consistently shows is linked to reduced cancer risk.

The increasing recognition of the importance of diet, nutrition, physical activity and body weight in cancer survival provides the rationale for the current work.

### Aims of this report

This report summarises the latest research on diet, nutrition, physical activity and body weight for people living with and beyond colorectal cancer. It also presents guidance for patients and recommendations for future research. This information can be used to develop materials for those responsible for the care of patients and patients themselves. We intend for this work to supplement our existing Cancer Prevention Recommendations. Whilst we recommend that people living with and beyond cancer follow these as much as they can, they were not specifically developed for this group. Our new guidance adds to these recommendations by highlighting specific behaviours which evidence suggests may be beneficial for people living with and beyond colorectal cancer.

## The evidence underpinning this report

The CUP Global research team at Imperial College London carried out a comprehensive analysis investigating the extent to which certain modifiable risk factors impact mortality (cancer-specific and all-cause) and risk of cancer recurrence in people after a colorectal cancer diagnosis. Three systematic reviews were carried out covering different exposures (diet, physical activity and sedentary behaviour, body weight). One review analysed data from 69 publications on diet and colorectal cancer outcomes, the review on physical activity and sedentary behaviour included 20 publications and the review on body weight included 85 publications.

An independent panel of experts graded the strength of the evidence from each review using WCRF International's pre-determined criteria to give a final evidence judgement for each exposure.

The panel judged the strength of much of the evidence as limited which hampered the expert panel's ability to develop recommendations. Despite this, we consider it important that people living with and beyond cancer can access reliable information based on the latest evidence that has been judged by our expert panel. The guidance described here has been developed using a robust and transparent process, incorporating input from expert clinicians and scientists, along with user input from health professionals and patients.

As an evidence-based organisation, we have used the best available evidence to develop this process and produce practical guidance on diet, physical activity and body weight for people living with and beyond colorectal cancer.

## Recommendations for future research

WCRF International, our panel of experts and the cancer survivors expert committee are continually discussing how the evidence base within survivorship research can be strengthened. We have agreed upon several key areas:

- Well-designed clinical trials and prospective cohorts are needed. These studies should account for differences in cancer sub-types, treatment types and other patient characteristics.
- Studies should aim to use the most accurate methods possible for assessing diet, nutrition, physical activity and body weight within populations living with and beyond cancer. They should include more accurate reporting of the timing of exposures.
- Novel methods for understanding the biological processes and mechanisms that underpin the associations we find in our cancer survivorship research are much needed.
- Research should aim to study more diverse populations.



By highlighting gaps in the evidence base, current research enables us to look to the future with insights on where further (high quality) research is needed. Observational studies can also help to identify promising exposures for testing in randomised-controlled trials. This allows us to develop new areas of investigation, with the aim of future new findings being used to develop specific recommendations for this group and to further confirm the benefits of following our recommendations and guidance.

## Guidance for people living with and beyond colorectal cancer

The guidance opposite has been developed using the best available evidence and consultation with experts in the field and individuals living with and beyond colorectal cancer.

Evidence comes from the 3 systematic reviews described in the full report, along with previous evidence reviewed for the Third Expert Report which led to the development of WCRF/AICR's Cancer Prevention Recommendations.

# Summary of our guidance for those living with and beyond colorectal cancer

EVIDENCE	GUIDANCE
 <p><b>General guidance</b> WCRF/AICR's recommendations for cancer prevention</p> <p>Nutritional factors and physical activity appear to predict outcomes in people living with and beyond cancer, but there is insufficient evidence that changing these improves outcomes.</p>	<p><b>We suggest that people consider following as many of WCRF/AICR's cancer prevention recommendations as they are able to.</b></p>
<p><b>New specific guidance on physical activity</b></p>  <p><b>Physical activity</b></p> <p>People who are more physically active have better health outcomes after a diagnosis of colorectal cancer, but it is uncertain whether increasing physical activity will improve these outcomes.</p>	<p><b>We suggest that people consider increasing their physical activity. However, physical activity should be increased under the supervision of health care professionals.</b></p> <p>Note: It may be particularly important for any increases in physical activity to be gradual, particularly for patients suffering from side-effects of their treatment surgery, or medication that may restrict their ability to be physically active, such as neuropathy or musculoskeletal issues.</p>
<p><b>New specific guidance on diet</b></p>  <p><b>Diet</b></p> <p><b>Wholegrains</b></p> <p>People who eat more wholegrains have better health outcomes after a diagnosis of colorectal cancer. But it is uncertain that increasing wholegrains improves these outcomes.</p>	<p><b>We suggest that people consider increasing their wholegrain intake.</b></p> <p>Note: Some patients may report difficulty consuming or digesting wholegrain foods following their treatment. This may be a particular issue following colon or rectal surgery. It is advisable that patients who increase (or reintroduce) wholegrain foods into their diet do so gradually and as and when they can; this should be done under the supervision of a health professional, particularly after surgical intervention.</p>
<p><b>Coffee</b></p> <p>People who consume more coffee (both caffeinated and decaffeinated) have better health outcomes after a diagnosis of colorectal cancer. But it is uncertain that increasing coffee improves these outcomes.</p>	<p><b>We suggest that people consider increasing their coffee intake.</b></p> <p>Note: Caffeinated coffee can have a laxative effect or cause palpitations, so it is advisable for patients to consider this when consuming coffee, or other caffeine-containing beverages (eg black or green tea) and foods (eg dark chocolate).</p>
<p><b>Sugary drinks</b></p> <p>People who consume less sugary drinks have better health outcomes after a diagnosis of colorectal cancer. But it is uncertain that decreasing sugary drinks improves these outcomes.</p>	<p><b>We suggest that people consider decreasing their sugary drink intake.</b></p>

Recommendations are based on strong evidence.

Guidance is based on evidence graded as 'limited suggestive'. Limitations in the evidence meant that the panel could not be confident that associations were causal, so we cannot be sure that changing the exposures would change the outcomes. Despite the limitations in the evidence, this represents the best advice based on the current evidence and expert opinion.

Health outcomes include all-cause mortality and cancer outcomes.

*Please note: We recommend that individuals living with and beyond cancer speak to their healthcare team before making any changes related to diet, nutrition, physical activity or body weight. Any healthcare professionals using this guidance should consider where a patient is in their cancer journey and interpret the guidance appropriately to suit each person's individual needs.*



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