

National dietary guideline adherence lowers cardiovascular risk

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(HealthDay)—Higher adherence to the 2015 to 2020 Dietary Guidelines



for Americans (measured by the Healthy Eating Index-2015 [HEI-2015]) is associated with lower risks for incident cardiovascular disease (CVD) and mortality, according to a study published in the February issue of *The Journal of Nutrition*.

Emily A. Hu, from the Welch Center for Prevention, Epidemiology, and Clinical Research at Johns Hopkins University in Baltimore, and colleagues assessed whether the HEI-2015, the Alternative Healthy Eating Index-2010 (AHEI-2010), alternate Mediterranean (aMed) diet, and Dietary Approaches to Stop Hypertension Trial (DASH) scores were associated with incident CVD, CVD mortality, and all-cause mortality among 12,413 participants (aged 45 to 64 years; 56 percent women) in the Atherosclerosis Risk in Communities Study. Average dietary intakes were assessed at Visits 1 (1987 to 1989) and 3 (1993 to 1995), with follow-up through 2017.

The researchers found 4,509 cases of incident CVD, 1,722 cases of CVD mortality, and 5,747 cases of all-cause mortality during a median of 24 to 25 years of follow-up. Participants in the highest quintile of HEI-2015 had a lower risk for incident CVD (hazard ratio, 0.84), CVD mortality (hazard ratio, 0.68), and all-cause mortality (hazard ratio, 0.82) versus participants in the lowest quintile after adjusting for demographic and lifestyle covariates. For AHEI-2010, aMed, and DASH scores, there were similar protective associations with no significant interactions by race.

"Our findings add evidence to the protective associations between the HEI-2015 score and cardiovascular and death outcomes, as well as corroborate previous literature on the AHEI-2010, aMed, and DASH scores," the authors write.

More information: <u>Abstract/Full Text (subscription or payment may be required)</u>



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