

# Methods in Epidemiology & Nutrition

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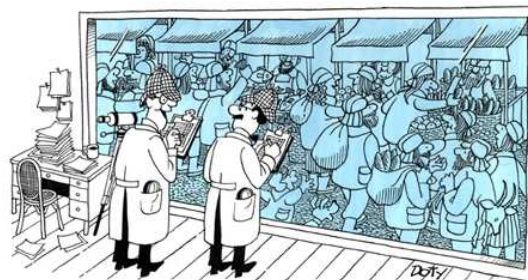
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Lesson, <http://Corpet.net/Denis>

## Observation vs. Experimentation

- *Observations de populations ou d'individus*
  - ne donne pas de preuve directe
- *Expérimenter au labo ou "sur le terrain"*
  - preuve directe que l'action a un effet



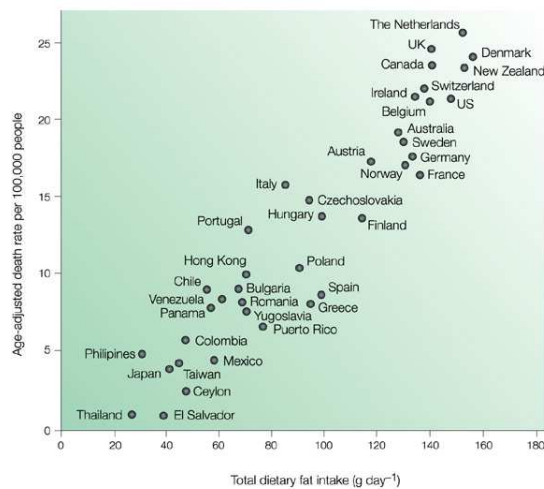
"These studies always remind me of an ant colony I had as a kid!"

## Observation vs. Experimentation

- To observe populations or individuals
  - Correlation studies (international)
  - Retrospective case-control studies
  - Prospective cohort studies
  -
- To do Experimental studies (lab or field)
  - In vitro, cell culture or bacteria
  - In vivo, animal studies (pre-clinical studies)
  - In volunteers: intervention trial

## Observation at Population Level international correlation studies

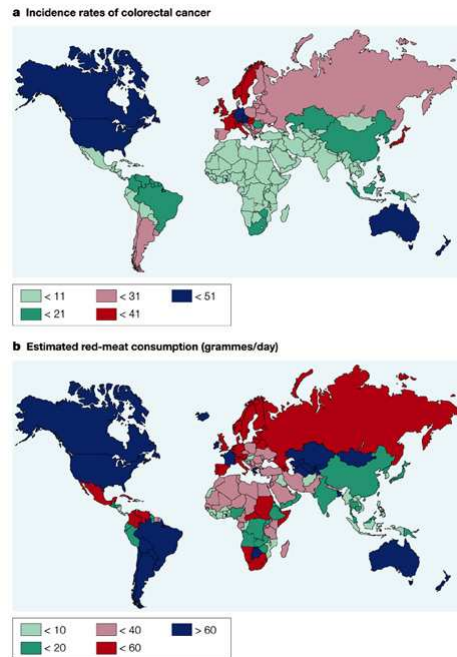
*E.g.:*  
International  
correlation  
between  
**Fat Intake &  
Breast cancer**  
mortality  
(*correlation  
is NOT  
a proof*)



Bingham & Riboli, 2004, Nature Reviews Cancer

***International  
Correlation  
shown on a map***

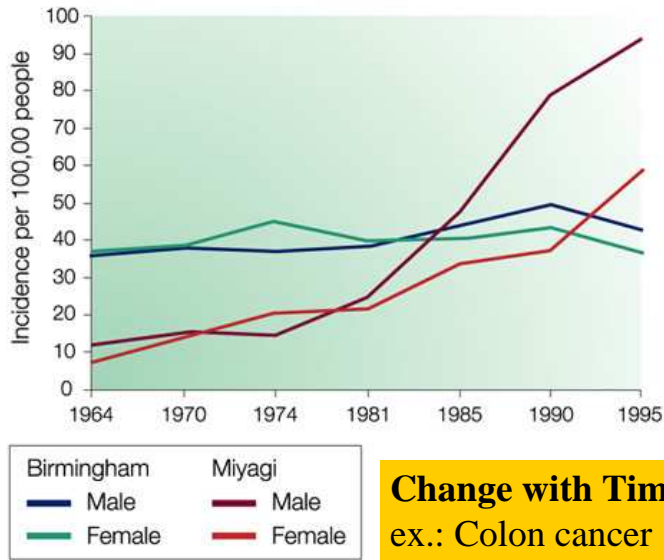
**Red meat  
eating countries  
Are also  
Colorectal cancer  
high risk countries  
(*correlation  
is NOT  
a proof*)**



Bingham & Riboli, 2004, Nature Reviews Cancer

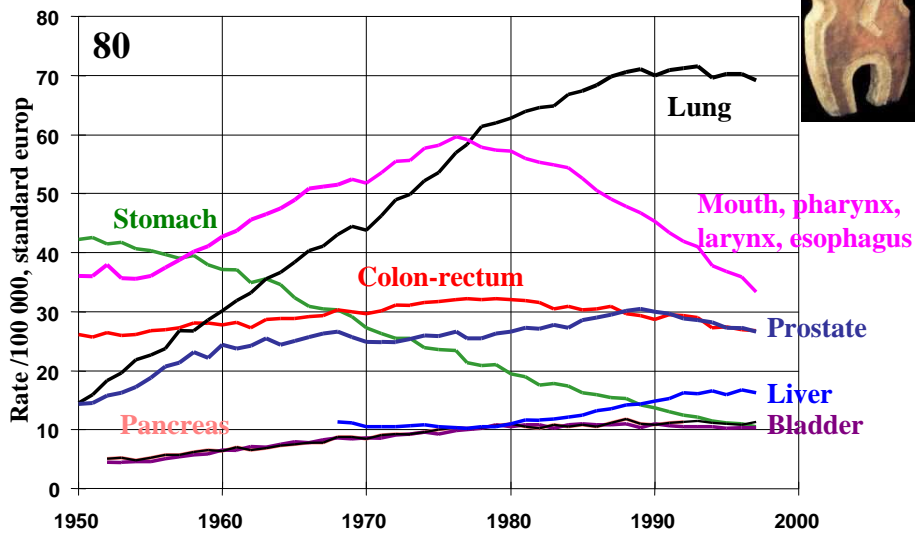
## Observation : Population Level Time Trends Studies

- Generates hypotheses on causes of disease : is there a change in the lifestyle that can explain the change in disease rate ?
- Also migrant studies : Observe changes in disease rate when a population migrates from a low-risk country to a high-risk country  
(**still not a proof !**)



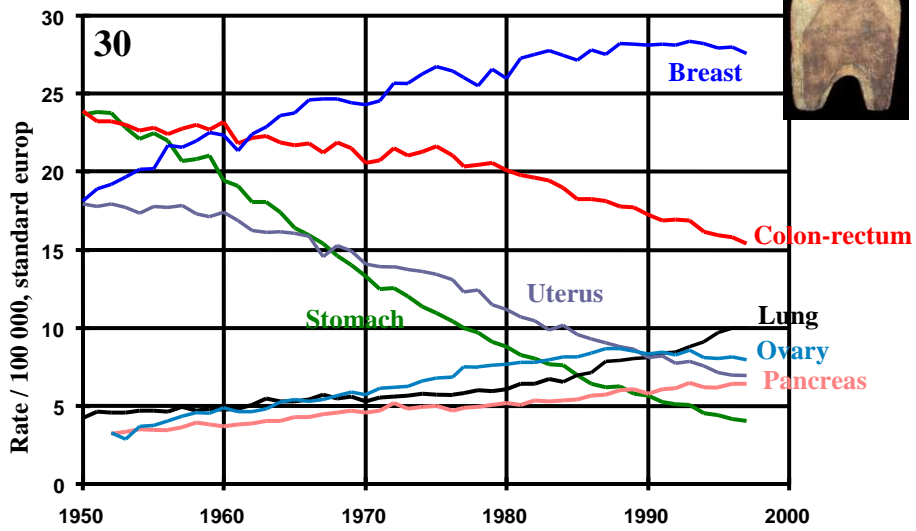
**Change with Time**  
 ex.: Colon cancer  
 in the UK (stability)  
 & in Japan (increase!)

### Evolution of cancer mortality in France 1950-2000 MEN



Hill C, Doyon F, Jan P

## Evolution of cancer mortality in France 1950-2000 WOMEN

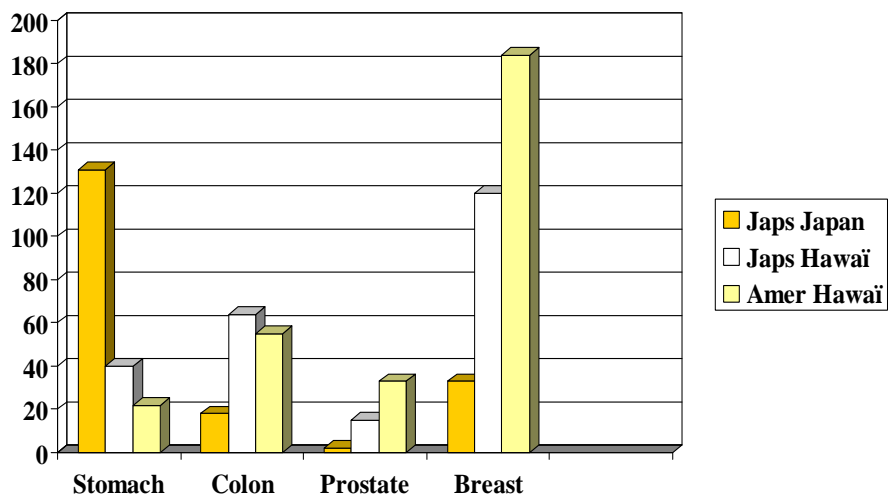


Hill C, Doyon F, Jan P



## Migrants Japan=>Hawai

Cancer Incidence /100 000 (Haenszel JNCI 1968)

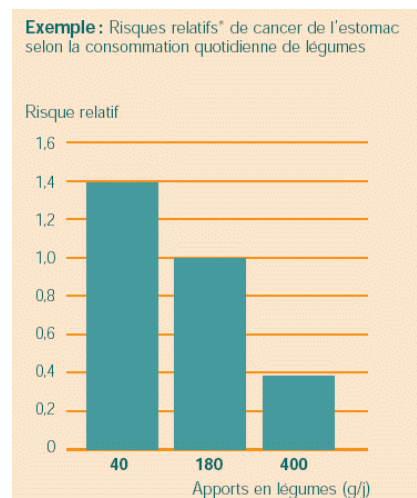


## Analytical Observation of **Individuals** : **case-control** studies (retrospectives)

- Go to the hospital, at the patient's bed (case)
- Ask many questions on past life
- Make a similar survey for similar controls
- Compare cases answers to controls answers, many questions, many people
- Ex: Stomach cancer and fruits & veg. intake

## Analytical Observation of **Individuals** : **Case-Control** studies (retrospectives)

- Population cut in 3 to 5 groups (tertiles, quartiles, quintiles)
- Relative Risk to get the condition (e.g., cancer) in the "big eater" group compared to the "small eater" group

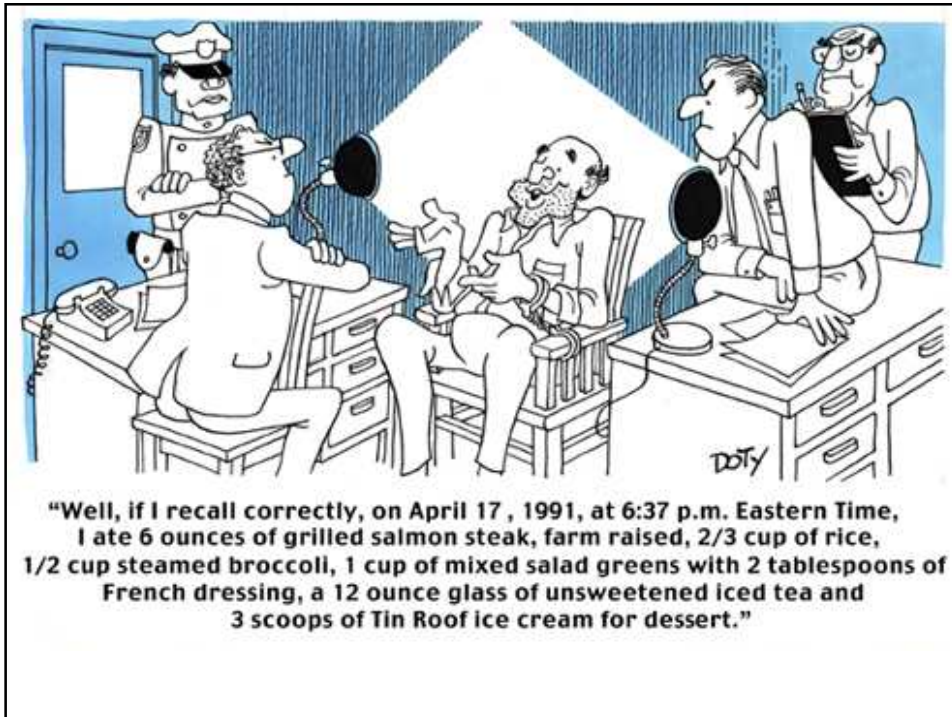


## Analytical Observation of **Individuals** : **Case-Control** studies (retrospectives)

- Relative Risk (precisely, Odd Ratio)
- And 95% Confidence Interval  
RR=2,1 (95% C.I.= 1,2 – 4,3)
- If **ONE** is not included in the 95% CI,  
the risk is significant
- Other example (protection):  
RR=0.38 (IC95= 0.15-0.89)

## Analytical Observation of **Individuals** : **Case-Control** studies (retrospectives)

- Advantage: fast & cheap (all cases & controls are "already" there : you only need to ask them questions)
- Drawbacks: Hard to remember past diet (**recall bias**): elapsed time, and illness yield false answers
- No ideal control (Hospital? Home? Street?)
- And multiple **confusion factors**

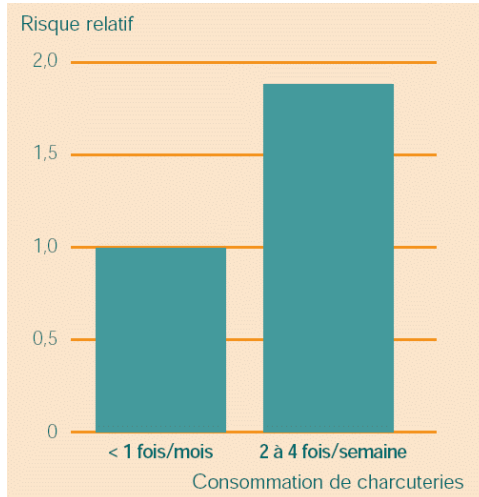


## Analytical Observation of **Individuals** : **Cohort Studies (prospective)**

- Choose a large **healthy** cohort
- Ask them how they live **now**
- Wait a long time till some of them get ill (cancer, CVD, diabetes, ... any condition you want to study)
- Compare answers from "cases" and "controls" (= the whole cohort, minus the "cases")
- Calculate relative risks (RR) and confidence intervals 95%. If excludes ONE, it's significant



## Analytical Observation of **Individuals** : **Cohort Studies (prospective)**



- Nurses' Health Study = 72000 American nurses (Harvard, USA)
- colorectal cancer & processed meat intake
- (Willet, 1990 : quintiles 1 & 5 are reported here)

## Analytical Observation of **Individuals** : **Cohort Studies (prospective)**

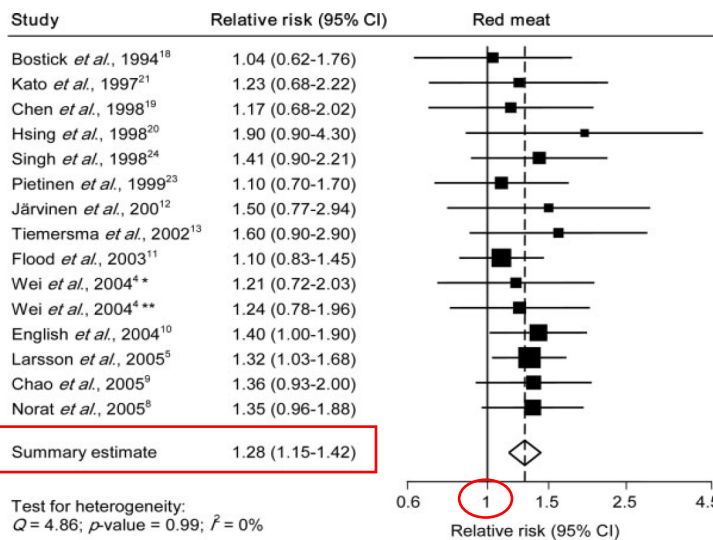
- Drawback:
  - Very long (*attendre que gens "tombent malades"*)
  - Very expensive (*faut énormément de gens*)
- Advantages:
  - No "recall bias": questions address present time, to healthy people
  - Ideal controls: everybody is similar to start with
- But confusing factors still possible...



## Meta-Analysis of Many Cohort Studies

Larsson  
& Wolk  
IJC 2006

Colorectal  
cancer  
&  
Red meat  
Intake





## Observation & Expérimentation

- **Observations de populations ou d'individus**
  - Études de corrélation. Evolution dans le temps
  - Etudes cas-témoin rétrospectives
  - Etudes de cohorte, prospectives

**Do not give a direct proof**

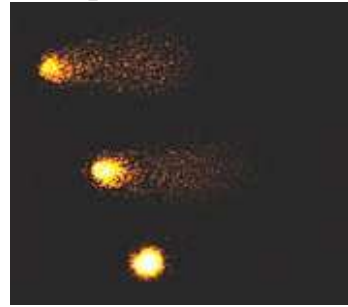
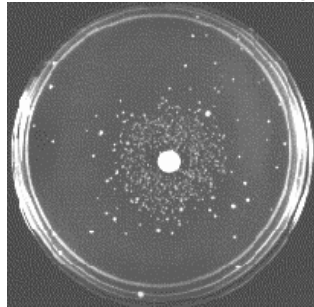
- Experimental studies: in the lab or "on the field"  
In vitro, In vivo, in volunteers

**Direct solid proof of a cause-effect relationship**

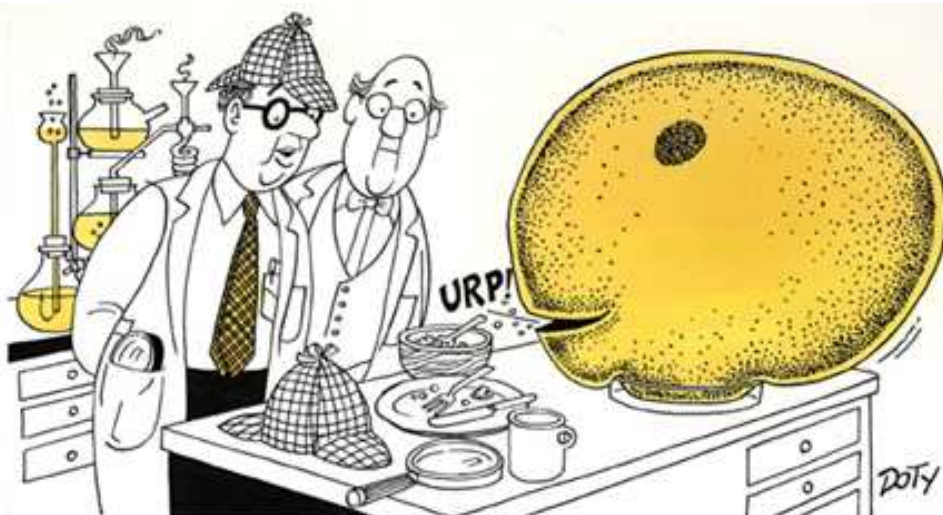
## Experimental Studies in Laboratories

In vitro, cell culture or bacterial

- Mutagens (Ames' test)
- Clastogens (human cells chromosomes)
- Comet Test (single cell gel electrophoresis)



**In vitro**



"Looks like Carstairs finally got a single cell to eat a whole meal.  
By the way, have you seen Carstairs lately?"

## Experimental Studies in Laboratories

In vitro, cell culture or bacterial

- Mutagens (Ames' test)
- Clastogens (human cells chromosomes)
- Comet Test (single cell gel electrophoresis)

In vivo, animal studies (preclinical)

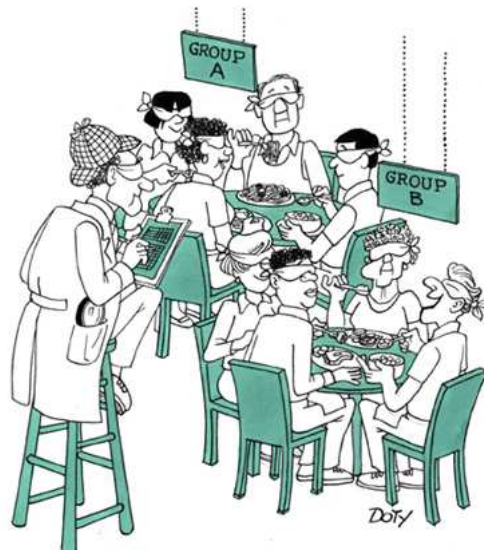
- Physiological biomarkers
- Carcinogens
- Carcinogenicity studies: protection or promotion



"It's an award for a cancer cure, but it only works on mice."

## Human Clinical Trials in Volunteers Intervention Studies

- Gold standard: clinical trials for drugs
- **Randomized** trial: treated ones chosen at random
- Treatment compared to a **placebo**
- **Double blinded** study:  
Volunteer AND Investigator  
do not know if placebo or treatment is taken



"Anyone for a game of Blind Man's Bluff after dinner?"

## Human Clinical Trials in Volunteers **Intervention Studies**

- Randomized, placebo-controlled, double-blind intervention studies are **the only valid proofs** that a given diet/agent can change a disease risk
  - But testing one agent once costs \$10 to 70 millions US dollars, et lasts 3 to 10 ans.
  - This explains why so few agents/diets have already been tested!