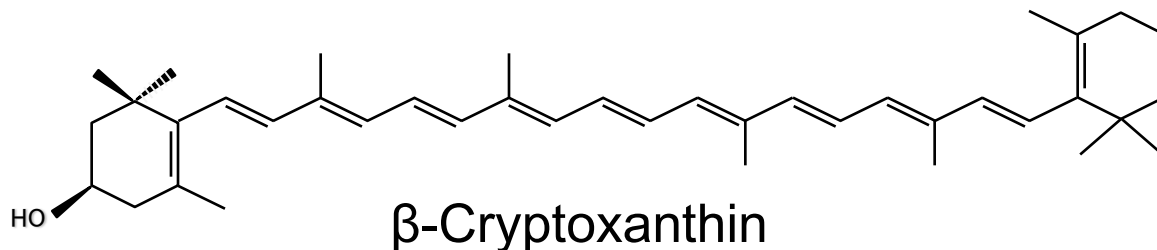


β -Cryptoxanthin prevents lifestyle-related diseases?

- Findings from the recent nutritional epidemiologic survey -



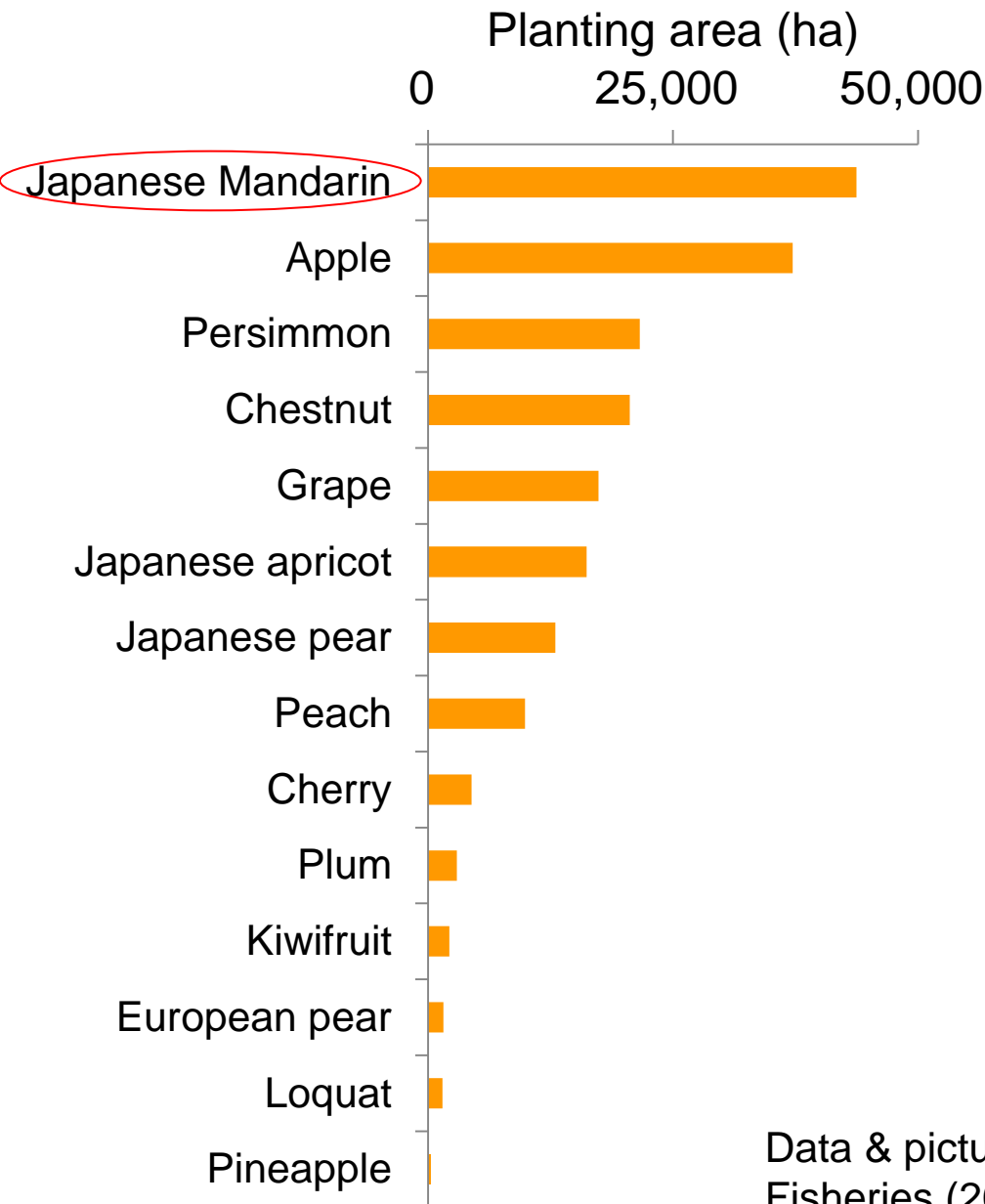
***Naoko KOZAI, Tatsushi OGATA
and Minoru SUGIURA***



Japan International Research Center for
Agricultural Sciences, Japan
NARO Institute of Fruit Tree Science, Japan



Fruit production in Japan

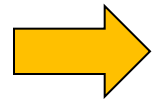


Japanese mandarin orange (*C. unshiu*) is the most popular fruit in Japan

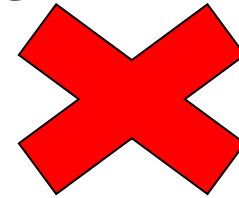
Data & picture source: Ministry of Agriculture, Forestry and Fisheries (2013)

In Japan...

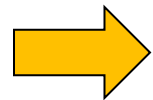
- ***Japanese fruit is very sweet***



‘Fruit is high-calorie food!’



- ***Fruit contains much fructose***



‘High intake of fruit causes hyperlipidemia or diabetes!’

Does high intake of fruit cause obesity, hyperlipidemia, or diabetes?

'Does high intake of fruit cause obesity, hyperlipidemia, or diabetes?'

To test this hypothesis, we undertook the simple questionnaire survey.

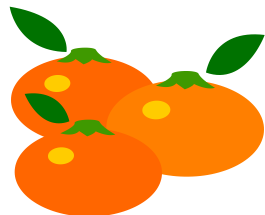
Subjects:

General consumer who lives in the area with one of the highest Japanese mandarin consumption levels in Japan.

Questions:

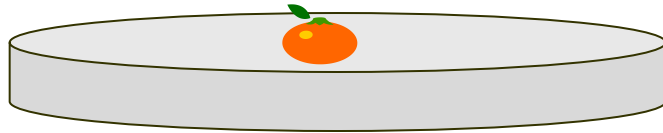
Age, sex, height, weight, frequency of mandarin eating (in season), and the history of disorders.

A total of 6,049 responses were obtained.
(2,118 male and 3,931 females)

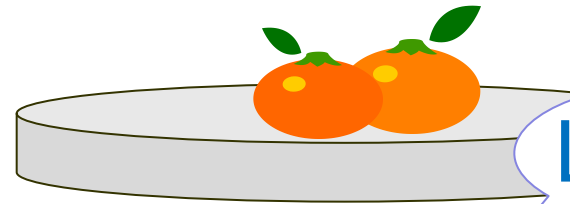


Japanese mandarin eater

Frequency of mandarin intake (in season, Oct - Feb)

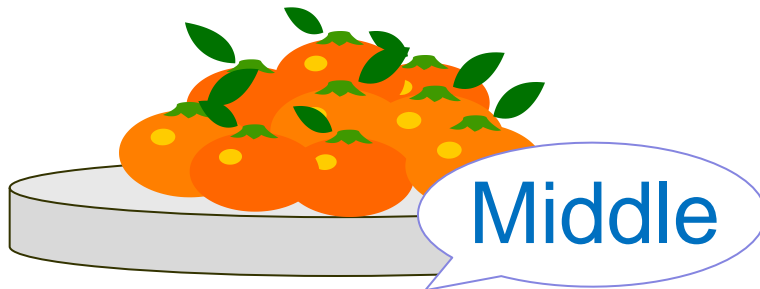


I : Rarely eat
(2.7%)



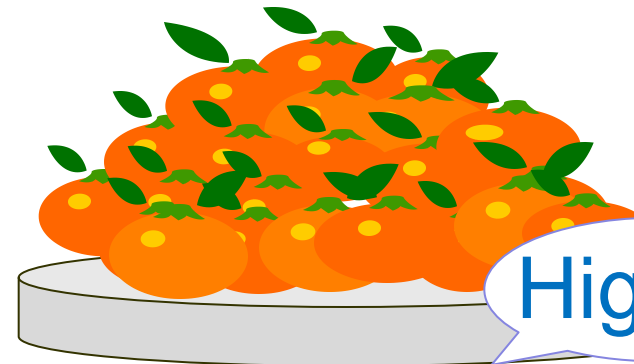
Lowest

II : Less than 3 fruits / one week
(29.7%)



Middle

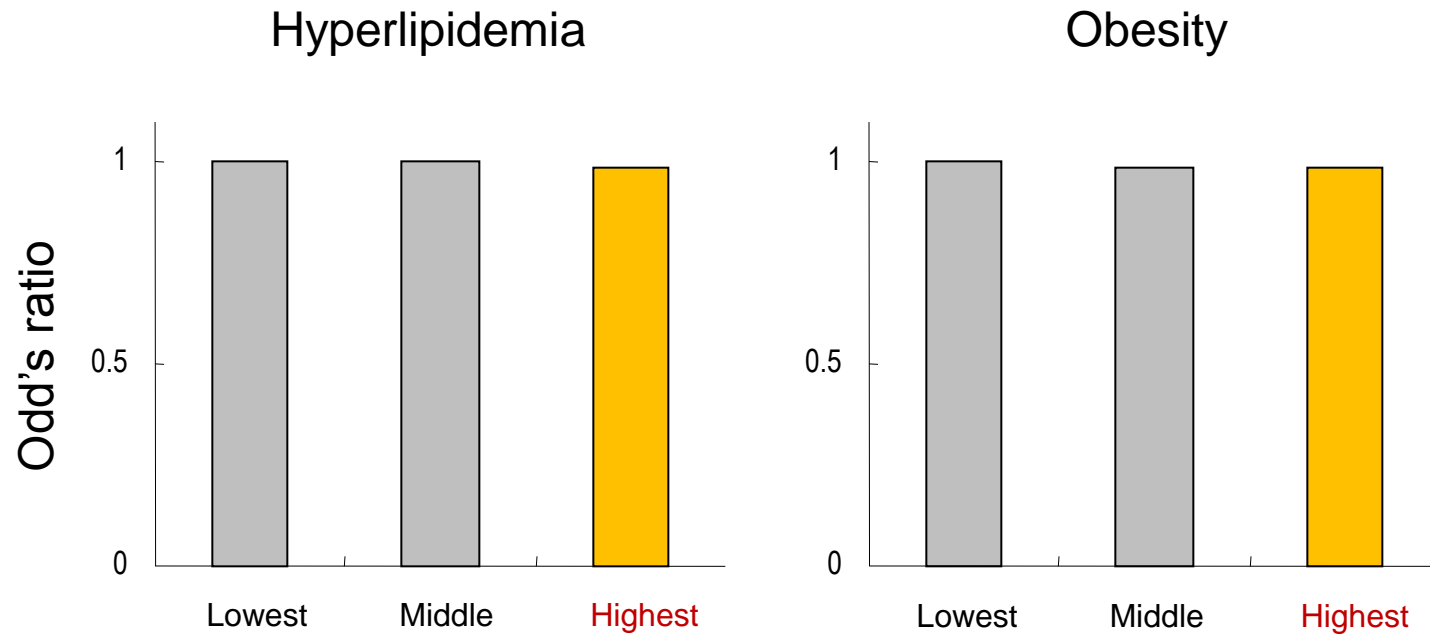
III : 1-3 fruits daily
(53.3%)



Highest

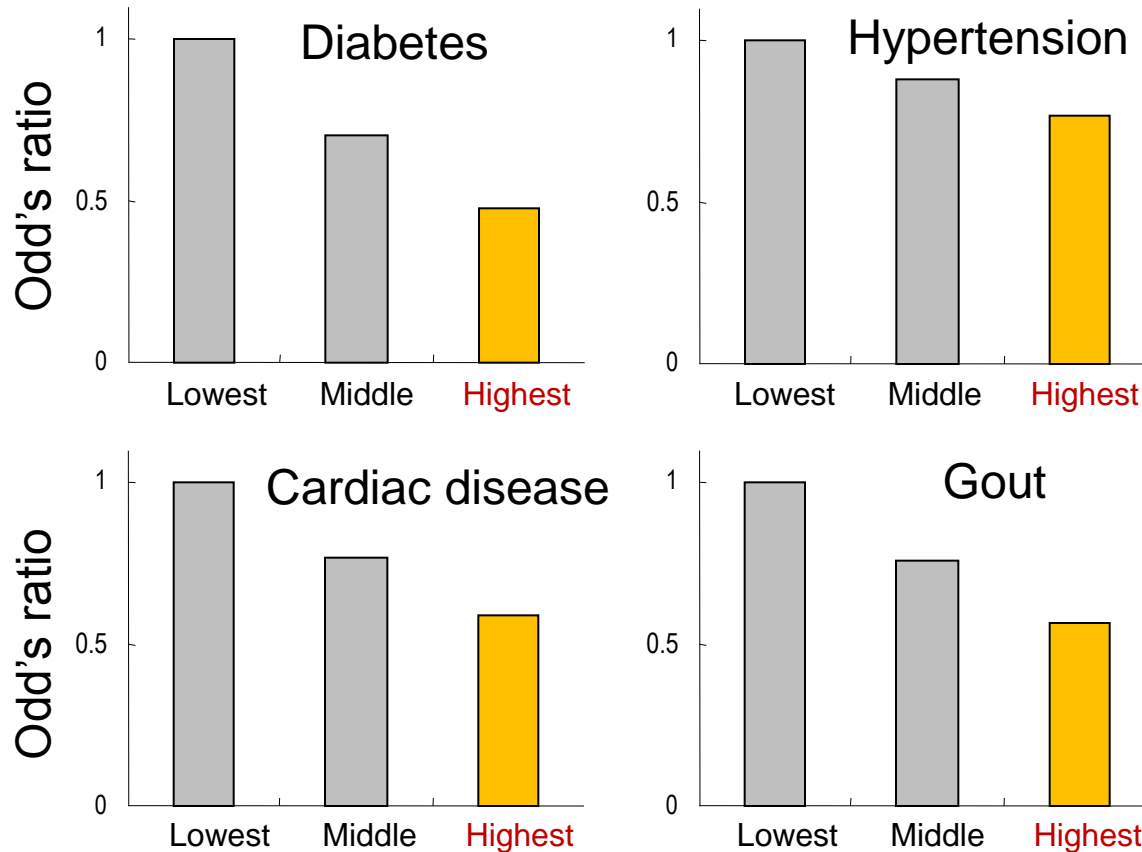
IV : More than 4 fruits daily
(14.3%)

Results from the self-administered questionnaire survey



There were no relationship between mandarin intake and hyperlipidemia or obesity

Results from the self-administered questionnaire survey



Low prevalence of lifestyle-related disease of big mandarin eater

What ingredients are contained in Japanese Mandarin orange?

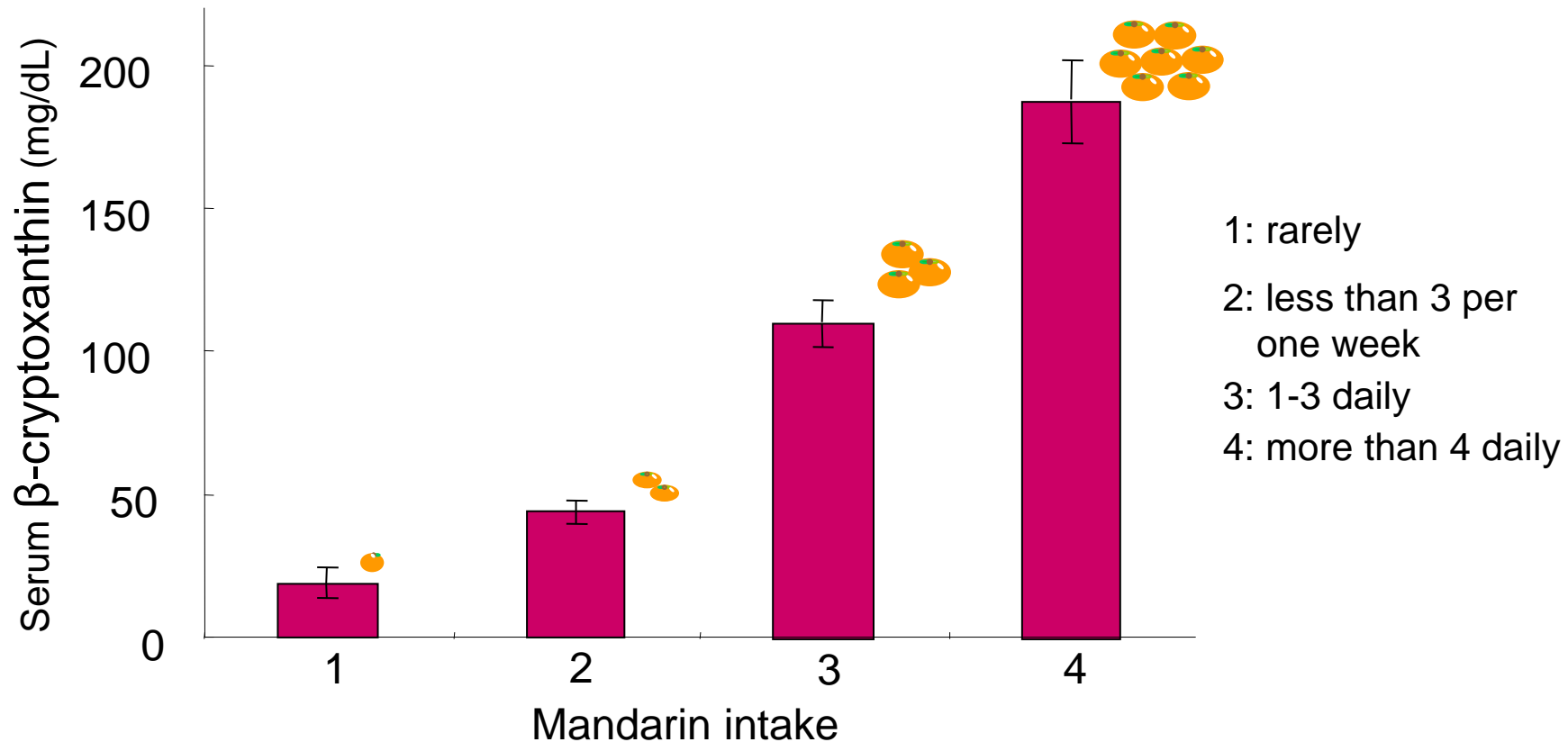
Ingredients

- Carbohydrate (Glucose, Sucrose, Fructose)
- Vitamins (Vitamin C, B₁, B₂, Folic acid)
- Citric acid
- Carotenoids (**β -Cryptoxanthin**, β -Carotene)
- Minerals (Potassium, calcium, iron)
- Fiber (soluble, insoluble)
- Flavonoids (Hesperidin, Naringin)
- Limonoids (Limonin, Nomilin)
- Odorous constituents (D-Limonene, Linalool)



**New functional
food factor ?**

Serum β -cryptoxanthin level greatly increased according to an increase of Japanese Mandarin intake



β-cryptoxanthin with the risk of lifestyle-related diseases

Recent nutritional epidemiologic findings

Nutritional Epidemiologic Survey: Mikkabi Study

Population

The study utilized data derived from health examination of inhabitants aged from 30 to 70 years performed in the town of Mikkabi in Shizuoka Prefecture, Japan.

Research Schedule

2003 Baseline survey (Cohort 1) 886 participants

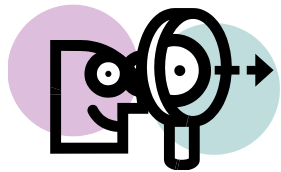
2004 Follow-up survey

2005 Baseline survey (Cohort 2) 701 participants

2006 Cohort 1 survey

2007 Follow-up survey

2008 Cohort 2 survey



2013 Cohort 1 survey

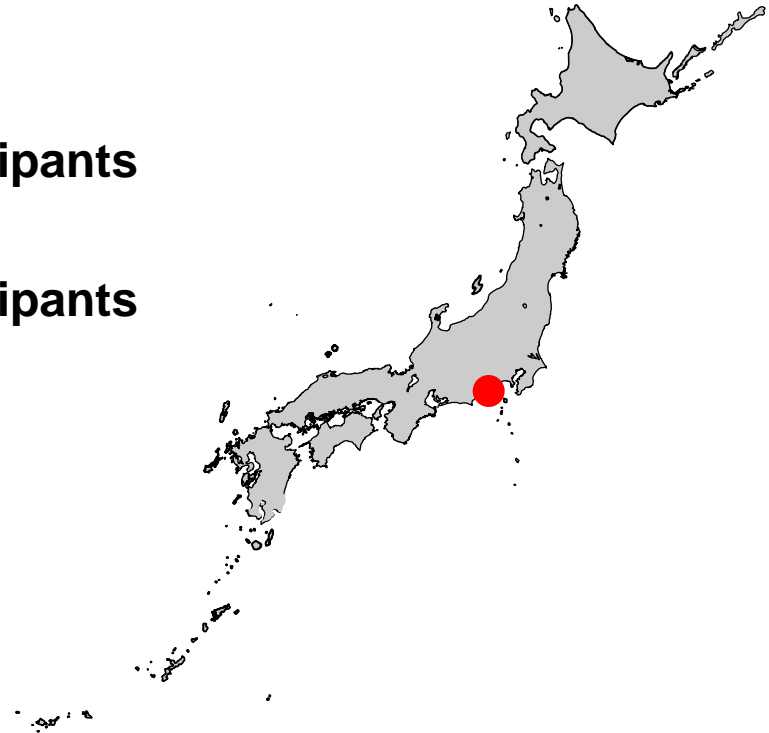
2015 Cohort 2 survey

Cohort 1

Diabetes, Atherosclerosis, Liver dysfunction survey

Cohort 2

Osteoporosis, Metabolic syndrome survey



From the Mikkabi Study...

Serum β -cryptoxanthin with lower risk for.....

Liver dysfunction

Alcohol-related increased serum gamma-GTP
Hyperglycemia-related increased serum ALT



Publications

J Epidemiol

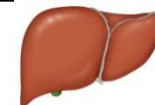
15: 180-186 (2005)

Diabetes Res Clin Pract

71: 82-91 (2006)

Insulin resistance

HOMA-IR estimated Insulin resistance



J Epidemiol

16: 71-78 (2006)

Arteriosclerosis

Brachial-ankle pulse wave velocity

Atherosclerosis
184: 363-369 (2006)

Metabolic syndrome

Interaction of smoking



Br J Nutr

100: 1297-1306 (2008)

Osteoporosis

Bone mineral density at radius



Osteoporosis Int

19: 211-219 (2008)

Osteoporosis Int

22: 143-152 (2011)

PLoS ONE

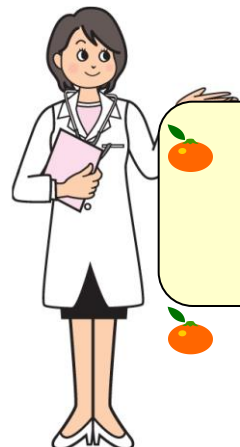
7: e52643 (2012)

Oxidative stress

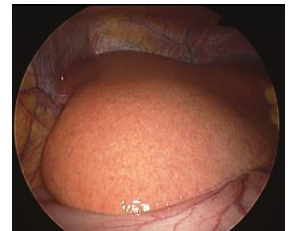
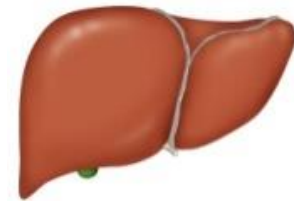
Induced by smoking and drinking

Br J Nutr

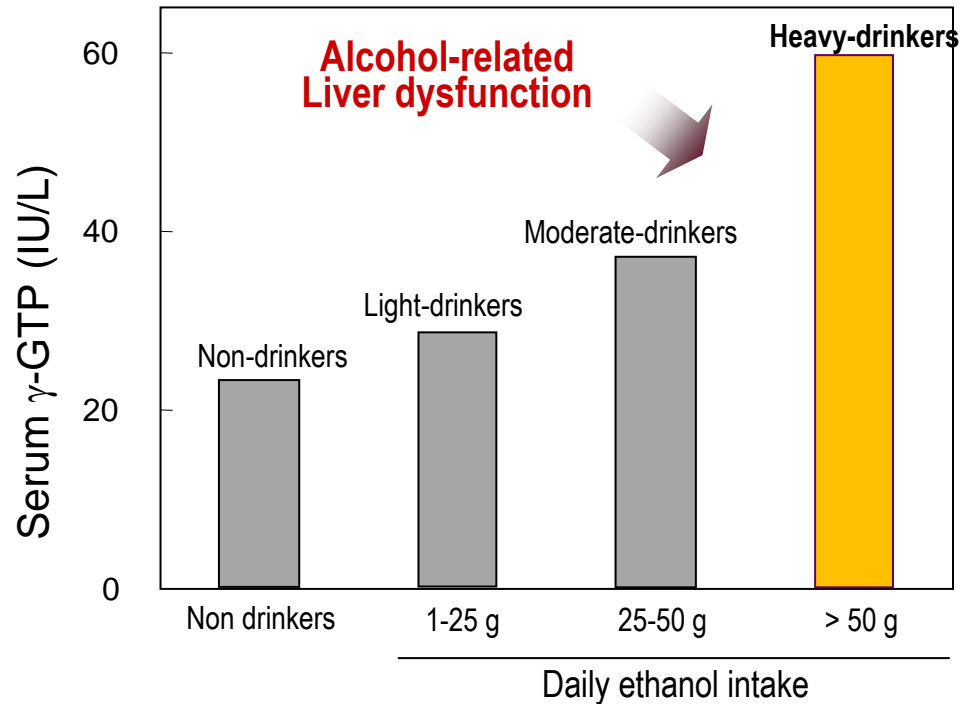
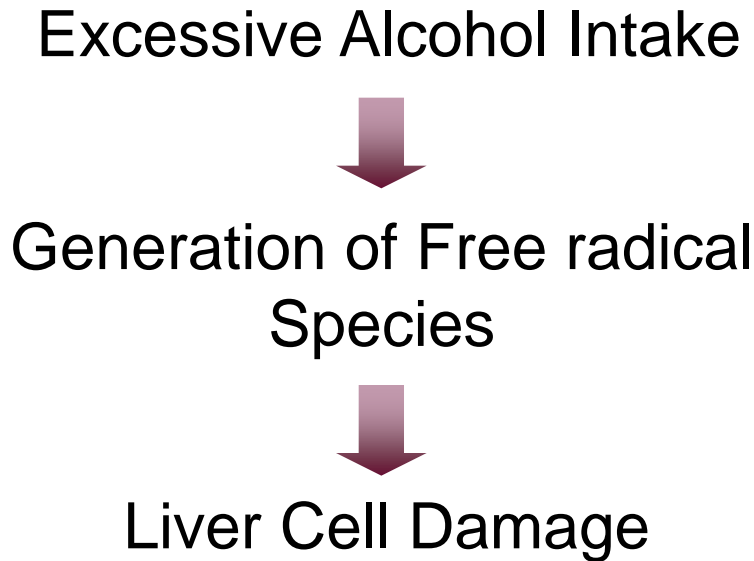
102: 1211-1219 (2009)



β -cryptoxanthin with the risk for liver dysfunction



High β -cryptoxanthin is inversely associated with serum γ -GTP in alcohol drinkers



Serum gamma-GTP: gamma-glutamyltransferase
Specific indicator for alcohol liver disease



Alcohol 25 g = Whisky 80 mL

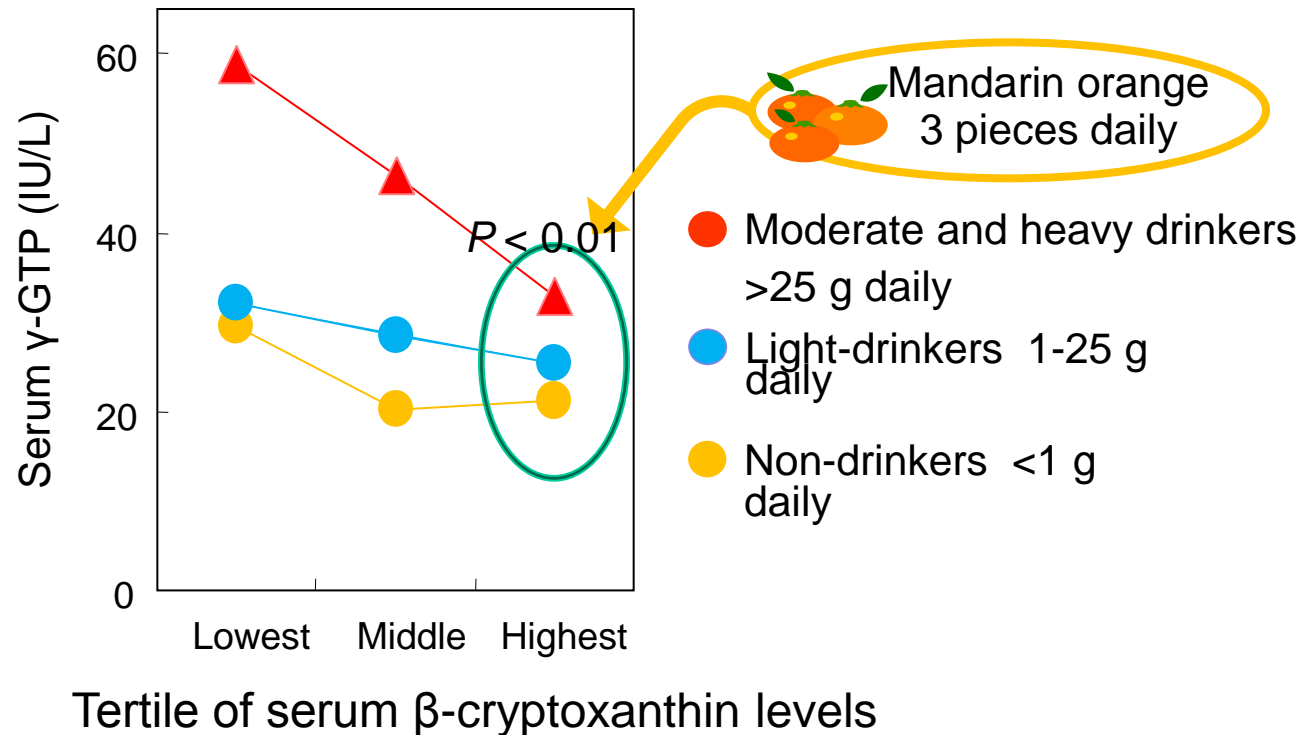
Confounding factors adjusted mean of serum γ -GTP

Confounding factors:

Age, BMI, total energy intake, smoking habits, etc.



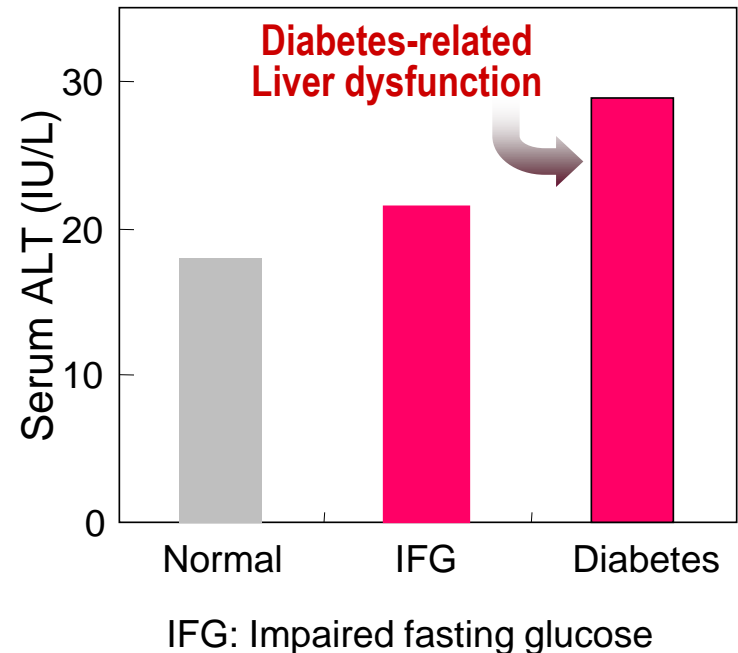
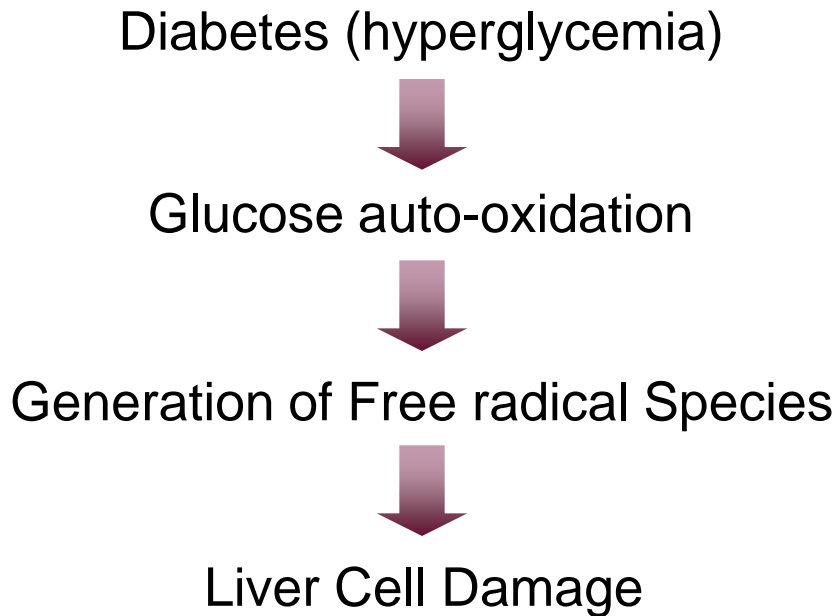
These factors associate with serum γ -GTP level.



Sugiura *et al. J Epidemiol.* 2005; 15: 180-186.

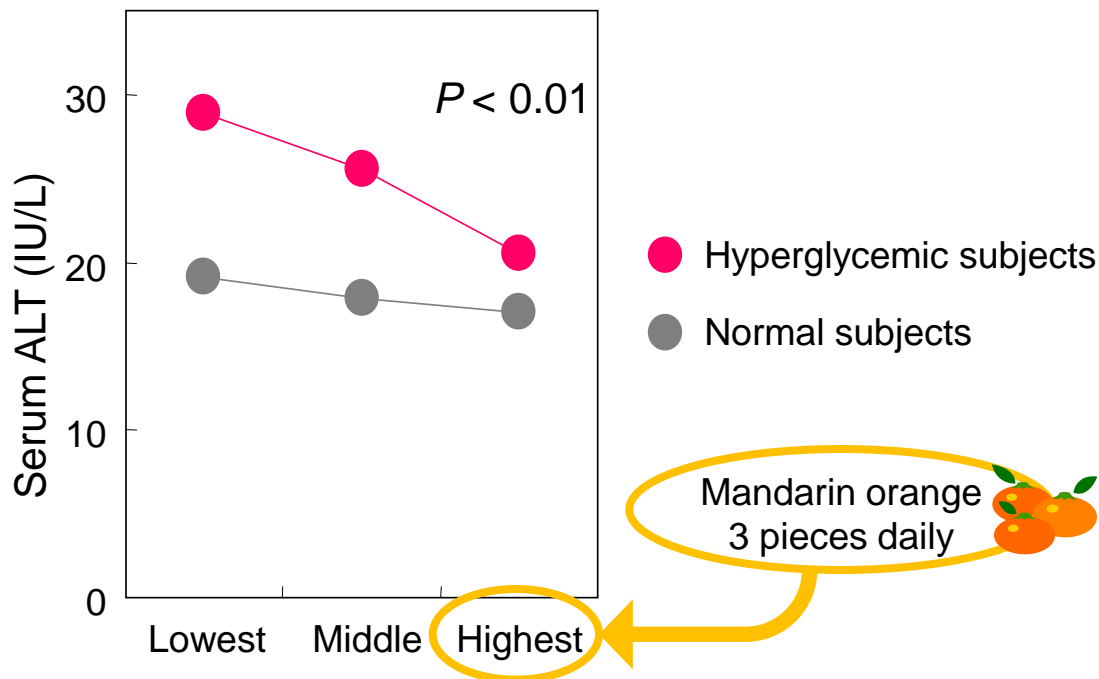
β -cryptoxanthin may act as a suppressor against liver cell damage and may inhibit progression of liver dysfunction induced by alcohol.

High β -cryptoxanthin is inversely associated with serum aminotransferases in hyperglycemic subject



Alanine aminotransferase (ALT):
Marker of liver dysfunction

Confounding factors adjusted mean of serum ALT



Tertile of serum beta-cryptoxanthin levels

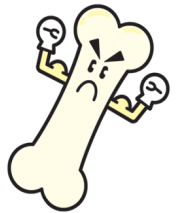
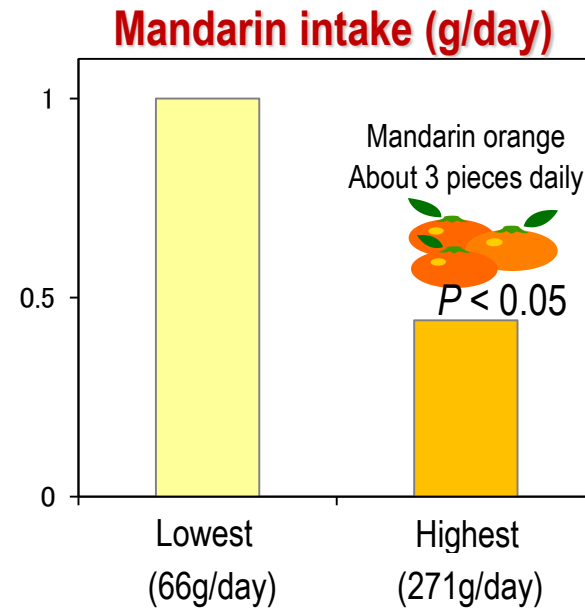
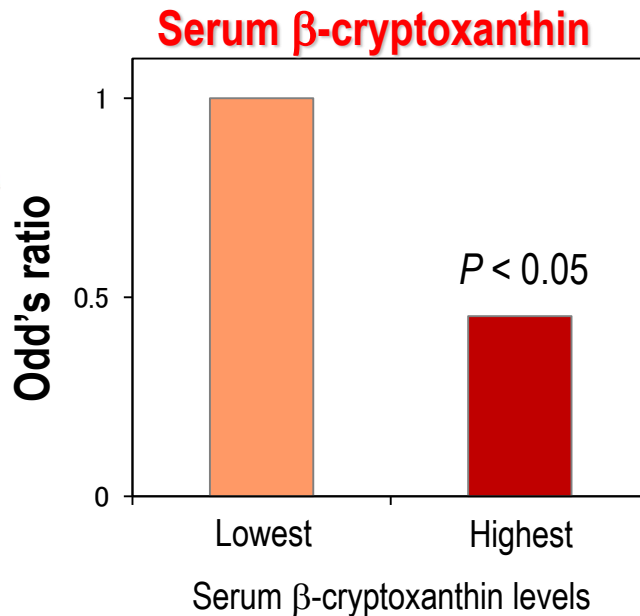
Sugiura et al. *Diabetes Research and Clinical Practice* 2006; 71: 82-91.

β -cryptoxanthin may act as a suppressor against liver cell damage in the earlier pathogenesis of liver dysfunction induced by hyperglycemia.

β -cryptoxanthin with the risk for Osteoporosis



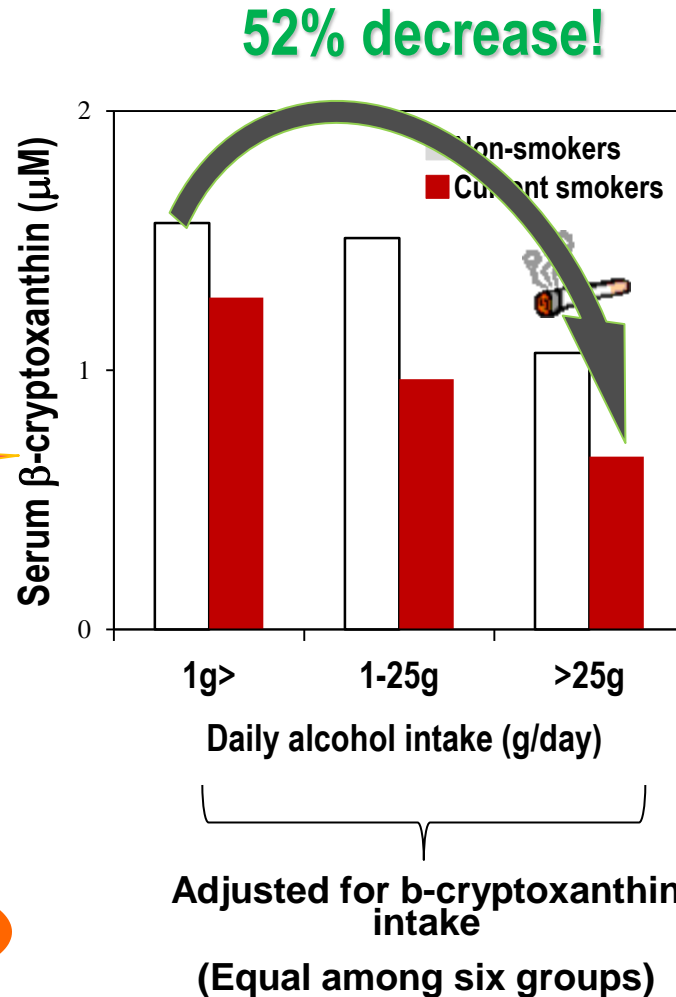
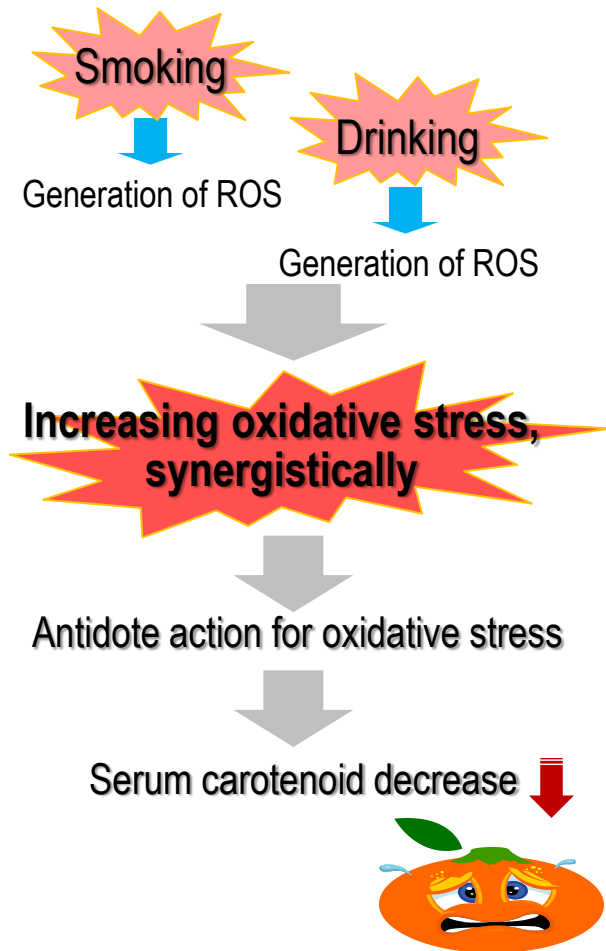
Serum β -cryptoxanthin (mandarin intake) with the risk for osteoporosis



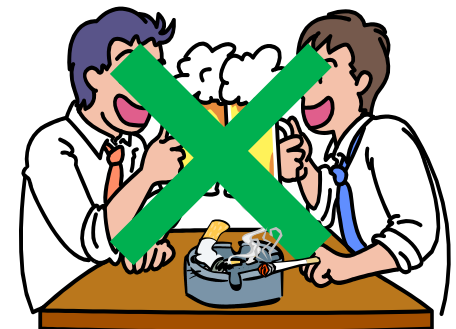
Sugiura et al. *Osteoporosis Int* 19: 211-219 (2008)

β -cryptoxanthin might affect on bone health

Defending against oxidative stress induced by smoking and drinking



Even if the same amount of β -cryptoxanthin is consumed, the serum concentration of β -cryptoxanthin would be extremely lower in alcohol drinkers among current smokers compared with non-drinkers among non-smokers.



Conclusion

High Serum β -cryptoxanthin associated with the lower risk for...

- Alcohol- and Diabetes-related Liver dysfunction
- Osteoporosis in post-menopausal female
- Insulin Resistance
- Arteriosclerosis
- Metabolic syndrome in current smokers
- Oxidative stress in smokers among regular alcohol drinkers

Further cohort and intervention studies, and mechanism studies will be required.

Thank you

