

Southern diet could raise your risk of stroke

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Eating Southern-style foods may be linked to a higher risk of stroke, according to research presented at the American Stroke Association's International Stroke Conference 2013.

In the first large-scale study on the relationship between Southern foods and stroke, researchers characterized a Southern diet by a high intake of foods such as fried chicken, <u>fried fish</u>, fried potatoes, bacon, ham, liver and gizzards, and <u>sugary drinks</u> such as sweet tea. In addition to being high in fat, <u>fried foods</u> tend to be heavily salted.

"We've got three major factors working together in the Southern-style diet to raise risks of cardiovascular disease: <u>fatty foods</u> are high in cholesterol, sugary drinks are linked to diabetes and <u>salty foods</u> lead to <u>high blood pressure</u>," said Suzanne Judd, Ph.D., M.P.H., lead researcher and a nutritional epidemiologist at the University of Alabama Birmingham's biostatistics department.

Previous research has shown that Southerners are about 20 percent more likely to have a stroke than the rest of Americans.

Comparing the <u>dietary habits</u> of more than 20,000 black and white adults, researchers found:

- Stroke frequency was directly proportional to how much Southern food participants ate.
- People who ate Southern foods about six times a week had a 41



percent higher stroke risk compared to those who ate it about once a month.

- Eating a Southern diet accounted for 63 percent of the higher risk of stroke among African-Americans above that of their white counterparts.
- Those whose diets were highest in fruits, vegetables, legumes and whole grains (eaten about five times a week) had a 29 percent lower stroke risk than those whose diets were the lowest in these foods (eaten about three times a week).

The study raises red flags for African-Americans who are five times more likely to eat Southern foods than whites, Judd said. And first-time stroke risk among blacks is almost double that of whites, according to American Stroke Association statistics.

Participants from 48 states answered telephone questionnaires about what foods they eat as part of the ongoing Reasons for Geographic and Racial Differences in Stroke (REGARDS) Study (begun in 2003). Participants were evenly divided between men and women, and the minimum age was 45.

Each person underwent an in-person medical assessment including height, weight and blood pressure measurements; an electrocardiogram; and a blood test. Every six months after, participants answered follow-up telephone questions about their stroke incidence, sleep habits and overall health.

Researchers designed a mathematical model to group foods commonly eaten together into 56 different categories. Each person's eating habits were scored based on the categories. The scores were further analyzed in relation to how often they had a stroke.

About two-thirds of the participants who ate the most Southern-style



foods lived in the southeastern United States. But, no matter where they live, people eating a lot of Southern foods should be more aware of their risks of stroke, Judd said.

Healthcare providers should educate patients about nutrition earlier, and ask patients about what they're eating, how much and how often, she said.

Provided by American Heart Association

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