

2013	DIET, NUTRITION, PHYSICAL ACTIVITY AND ENDOMETRIAL CANCER		
		DECREASES RISK	INCREASES RISK
STRONG EVIDENCE	Convincing		Body fatness ¹
	Probable	Physical activity ² Coffee ³	Glycaemic load Adult attained height ⁴
LIMITED EVIDENCE	Limited – suggestive		Sedentary habits ⁵
	Limited – no conclusion	Cereals (grains) and their products; fruits; vegetables; pulses (legumes); soya and soya products; red meat; processed meat; poultry; fsh; eggs; milk and dairy products; dietary fibre; total fat; animal fat; saturated fatty acids; cholesterol; tea; glycaemic index; protein; retinol; beta-carotene; folate; vitamin C; vitamin E; multivitamins; alcohol; acrylamide; dietary pattern; and lactation	
STRONG EVIDENCE	Substantial effect on risk unlikely		

- 1 The Panel interpreted BMI (including BMI at age 18-25 years), measures of abdominal girth, and adult weight gain as interrelated aspects of body fatness as well as fat distribution.
- 2 Physical activity of all types: occupational, household, transport and recreational.
- 3 The effect is found in both caffeinated and decaffeinated coffee and cannot be attributed to caffeine.
- 4 Adult attained height is unlikely to modify the risk of cancer. It is a marker for genetic, environmental, hormonal, and also nutritional factors affecting growth during the period from preconception to completion of linear growth.
- 5 Sedentary habits as marked by sitting time.