Fish Consumption and Coronary Artery Disease in China

To the Editor:

As Dallongeville et al.1 indicated in the introduction of their article, it has been well established that fish consumption has a protective cardiovascular effect. To the existing theories of this association, the authors added another: fish consumption is associated with decreased heart rate and thus lower risk of sudden death because heart rate is positively associated with risk of sudden death.

The protective effect of fish consumption on coronary artery disease was known in China nearly four decades ago. In an epidemiological study on the regional differences in incidence of coronary artery disease in people over 40 years of age in China, which was carried out by the Cardiovascular Institute, Fu Wai Hospital of the Chinese Academy of Medical Sciences, Beijing, China, it was noted that the lowest incidence of coronary artery disease (0.6%) was in the fishermen in Choushan archipelago (Table).2

That eating fish has a beneficial effect and eating animal fat has an unfavorable influence on the incidence of coronary artery disease is further revealed by two observations noted in the Table. First, the incidence of coronary artery disease is lower in Kwangtung (now called Guangdong) in southern China (2.01%) than in Peking (now called Beijing) in northern China (4.4%).2 The southerners eat more fish than the northerners not only because the former have more ready access to fish in the water (Guangdong is a coastal province) but because the northerners have to eat more animal fat to meet the fuel requirements necessitated by the colder weather in the north, and Beijing is inland.

The second and more important observation is that in the same province in China, the more animal fat there is in the diet, the higher the incidence of coronary artery disease. In Sinkiang (now called Xinjiang), the nomads, who eat predominantly animal fat, have nearly eight times (19.75%) as much coronary artery disease as the cadres (2.46%).2

This observational study from China2 was recently confirmed by a prospective study from Shanghai, China.3 Two additional studies published in June in this journal4,5 rendered further support to this association. Therefore, the positive association between fish consumption and coronary artery disease and/or sudden death is not a fishy story after all.

Tsung O. Cheng, MD
Department of Medicine
George Washington University Medical Center
Washington, DC
tcheng@mfa.gwu.edu


Response

Early ecological studies had shown significantly lower rates of cardiovascular disease in populations that traditionally consumed a lot of fish. These observations were later clarified in cohort studies from North America and Europe and in secondary prevention trials showing a lowering of fatal cardiovascular events in patients supplemented with fish or fish oil concentrates.

Meanwhile, it has become evident that the lowering of triglycerides and the modest effects of n-3 fatty acids on hemostasis could not, in itself, explain the spectacular reduction in fatal cardiovascular events observed in trials. Recently, the ascribing of major antiarrhythmic properties to fish oil1 and of favorable morphological changes in carotid plaque2 associated with fish oil supplementation have shed new light on the cardiovascular protective properties of fish oil. However, most of the evidence on the antiarrhythmic effects of eicosapentaenoic and docosahexaenoic fatty acids was acquired

<table>
<thead>
<tr>
<th>Year</th>
<th>Region</th>
<th>Male No.</th>
<th>Male Incidence (%)</th>
<th>Female No.</th>
<th>Female Incidence (%)</th>
<th>Total No.</th>
<th>Total Incidence (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1960</td>
<td>Peking</td>
<td>2726</td>
<td>2.19</td>
<td>641</td>
<td>3.57</td>
<td>3367</td>
<td>2.45</td>
</tr>
<tr>
<td>1960</td>
<td>Shanghai</td>
<td>5473</td>
<td>3.20</td>
<td>1806</td>
<td>3.20</td>
<td>7279</td>
<td>3.20</td>
</tr>
<tr>
<td>1965</td>
<td>Kansu</td>
<td>1129</td>
<td>1.86</td>
<td>155</td>
<td>9.03</td>
<td>1284</td>
<td>2.73</td>
</tr>
<tr>
<td>1965</td>
<td>Szechuan</td>
<td>217</td>
<td>7.37</td>
<td>66</td>
<td>8.46</td>
<td>283</td>
<td>7.77</td>
</tr>
<tr>
<td>1965</td>
<td>Peking (factory workers)</td>
<td>500</td>
<td>4.40</td>
<td>...</td>
<td>...</td>
<td>500</td>
<td>4.40</td>
</tr>
<tr>
<td>1965</td>
<td>Choushan (fisherman)</td>
<td>1625</td>
<td>0.60</td>
<td>...</td>
<td>...</td>
<td>1625</td>
<td>0.60</td>
</tr>
<tr>
<td>1965</td>
<td>Sinkiang (Xinjiang)</td>
<td>Cadres 195</td>
<td>2.46</td>
<td>...</td>
<td>...</td>
<td>195</td>
<td>2.46</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Nomads 81</td>
<td>19.75</td>
<td>...</td>
<td>...</td>
<td>81</td>
<td>19.75</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total 276</td>
<td>7.60</td>
<td>...</td>
<td>...</td>
<td>276</td>
<td>7.60</td>
</tr>
<tr>
<td>1971</td>
<td>Shanghai (factory workers)</td>
<td>1747</td>
<td>6.90</td>
<td>...</td>
<td>...</td>
<td>1747</td>
<td>6.90</td>
</tr>
<tr>
<td>1971</td>
<td>Kwangtung (Guangdong)</td>
<td>912</td>
<td>1.54</td>
<td>181</td>
<td>4.40</td>
<td>1093</td>
<td>2.01</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>14,605</td>
<td>3.08</td>
<td>2849</td>
<td>3.83</td>
<td>17,454</td>
<td>3.20</td>
</tr>
</tbody>
</table>

*Courtesy of the Cardiovascular Institute, Fu Wai Hospital of the Chinese Academy of Medical Sciences (Beijing, China).
in experimental conditions or highly controlled clinical trial conditions with fish oil concentrates. Although these data provided a major support for clinical recommendations at the population level, there was until now no evidence that consumption of fish, rather than concentrates, had an impact on cardiac rhythm. Our study plugs this gap and, thus, provides the first evidence that consumption of fish in daily life is associated with lower heart rates. Moreover, the finding, in our study, of a similar association in Northern Ireland and France—two countries with contrasting nutritional habits and cardiovascular mortality rates—supports a robust association.

The findings of similar ecological cardioprotective relationships and favorable associations in a cohort from China—a country with a very different lifestyle, nutritional habits, and low cardiovascular event rates compared with other continents—reinforce the ubiquity of this association. As pointed out by Dr Cheng, it remains to be clarified whether the finding of low incidence of coronary heart disease rates among fish consumers in Chinese ecological and cohort studies results from the substitution of saturated fat from meat with n-3 fatty acids from fish, possibly resulting in lower LDL-cholesterol levels and diminished coronary atheroma formation, or whether, in China—as in North America and Europe—the fish n-3 fatty acids have also a significant impact on sudden death.

Jean Dallongeville, MD, PhD
Michèle Montaye, MD
Philippe Amouyel, MD, PhD
Institut Pasteur de Lille
Lille, France

John Yarnell, MD, PhD
Aluns Evans, MD, PhD
Department of Epidemiology and Public Health
Queen’s University Belfast
Belfast, Ireland

Pierre Ducimetière, PhD
Annie Bingham, MSc
INSERM U 258
Hôpital Paul Brousse
Villejuif, France

Gérald Luc, MD
INSERM U 258
Hôpital Paul Brousse
Villejuif, France

INSERM U 545
Institut Pasteur de Lille
Lille, France

Dominique Arveiler, MD, PhD
Bernadette Hass, MD
Laboratoire d’Épidémiologie et de Santé Publique
Strasbourg, France

Jean Ferrières, MD, MPH
Jean-Bernard Ruidavets, MD, PhD
INSERM U 558
Faculté de Médecine Purpan
Toulouse, France

Fish Consumption and Coronary Artery Disease in China
Tsung O. Cheng

Circulation. 2004;109:e155-e156
doi: 10.1161/01.CIR.0000118320.92577.C2
Circulation is published by the American Heart Association, 7272 Greenville Avenue, Dallas, TX 75231
Copyright © 2004 American Heart Association, Inc. All rights reserved.
Print ISSN: 0009-7322. Online ISSN: 1524-4539

The online version of this article, along with updated information and services, is located on the World Wide Web at:
http://circ.ahajournals.org/content/109/9/e155

Permissions: Requests for permissions to reproduce figures, tables, or portions of articles originally published in Circulation can be obtained via RightsLink, a service of the Copyright Clearance Center, not the Editorial Office. Once the online version of the published article for which permission is being requested is located, click Request Permissions in the middle column of the Web page under Services. Further information about this process is available in the Permissions and Rights Question and Answer document.

Reprints: Information about reprints can be found online at:
http://www.lww.com/reprints

Subscriptions: Information about subscribing to Circulation is online at:
http://circ.ahajournals.org/subscriptions/