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Coffee in the Fight Against Type 2 Diabetes, Colon Cancer, Alzheimer's and More

According to Coffee and Addiction Expert

Effects of coffee consumption not the same as caffeine in pill form

New York, NY - October 21, 2004 -The average American adult drinks two to four cups of coffee a day. That is two to four cups of a beloved beverage that just happens to be associated with reduced rates of suicide, cirrhosis of the liver, cancer, atherosclerosis, Parkinson's and Alzheimer's diseases and diabetes - and is not addictive as are common drugs of abuse.

Peter R. Martin, M.D., an expert on coffee and addiction, spoke of the potential health benefits of coffee consumption at the science writers' symposium, *Coffee and Your Health: Surprising Findings*, held today at the New York Academy of Sciences.

Dr. Martin is Director of the Institute for Coffee Studies and of the Vanderbilt Addiction Center and the Division of Addiction Medicine in the Department of Psychiatry at Vanderbilt University School of Medicine in Nashville, TN.

Discussing the relationship between coffee consumption and addiction, Dr. Martin told the group, "This area is dear to my heart, since I'm an addiction psychiatrist and regularly face the challenge of treating patients addicted to alcohol, cocaine, morphine, etc. I would like to underline that there is no evidence that coffee, or even caffeine, is addictive in the way those drugs are. Even though headaches and the urge to drink coffee can occur after precipitously stopping drinking coffee, people do not destroy their lives and their marriages, rob banks, and commit assault or murder in order to obtain coffee."

The psychiatrist went on to explain that researchers are beginning to uncover ways in which coffee may be beneficial for individuals who suffer from addiction. He used naltrexone as an example of a medication that reduces relapse to alcoholism, noting that the compounds uncovered in coffee block the actions of brain opioid receptors exactly as naltrexone does.

Dr. Martin said that he was taught in medical school that coffee was not only detrimental to health, but it was also addictive, and that only after an extensive review of the scientific literature did he change his opinion. He explained that the early studies showing harmful effects of coffee were hampered by "significant methodological weaknesses and confounding lifestyle variables,

such as smoking."

Coffee was frequently equated with caffeine, Dr. Martin said, so that the medical community did not take into consideration that coffee is a complex mixture of biologically active compounds. Scientists often assumed that the effects of coffee consumption were the same as those from caffeine in pill form. However, coffee contains other compounds that may counteract the actions of caffeine. Some compounds in coffee are antioxidants that benefit the heart, for example.

Furthermore, coffee seems to reduce the prevalence of type 2 diabetes in some unknown way. Dr. Martin described three recent epidemiologic studies wherein "...the increasing consumption of coffee seems to reduce the prevalence of type 2 diabetes." He went on, "So, even though accepted knowledge about the actions of caffeine would indicate that individuals with diabetes should avoid coffee, these population studies actually suggest the opposite, that coffee may be protective with respect to the development of type 2 diabetes. The only logical conclusion that can be drawn from these conflicting data is that something in coffee, other than caffeine, may have potentially beneficial effects on diabetes!"

In a three-year-old research project at Vanderbilt, Dr. Jane Shearer has shown that a non-caffeine constituent of coffee increased the capacity of laboratory rat livers to remove glucose from the blood by 55%. Dr. Martin explained that, in addition to the potential of such a substance to treat diabetes, this finding is significant because it might explain why increased coffee consumption is associated with reduced rates of type 2 diabetes. More work is needed to explore these findings, the speaker said, but the study results might discourage practitioners from telling their patients routinely that they shouldn't drink coffee.

Dr. Martin told the group, "...the potential for coffee to reduce the rates of type 2 diabetes may have significant implications with respect to health, especially in populations in which the prevalence of type 2 diabetes is rising precipitously, and who do not already drink coffee."

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