

Coffee

Coffee: Regular or Decaf?

Somehow the Northwest has gotten the reputation of being the coffee capital of the US. This is obviously due to the worldwide popularity of Starbucks and those other nouveau companies that have ridden the wave over the past few years. Those of us who pre-date Starbucks know that this is only a 90's phenomenon. I personally feel that the coffee capital of the US is somewhere in south central Louisiana where I grew up. (Most Northwesters have never heard of Community coffee.) Though a Louisiana coffee cup is pretty small, you don't need much of that dark, thick brew to know you've had a cup of coffee. I mention this to point out the difficulty I have in answering the question I'm often asked: "Is coffee bad for me?" The problem is that all coffee isn't the same. There's blended, there's roasted, there's drip, there's espresso, there's decaf, there's naturally decaf, there's even boiled if you're a camper. And you can brew it about as strong or as weak as you want. So how in the world can anyone study the effects of coffee drinking over the long term? Not too surprisingly, a number of studies have been done to try to determine if there is a link between coffee and the risk of heart attack. And, not too surprisingly, there have been confusing results. The most recent one comes from Harvard, and compared the risk of heart attack among four groups: those who didn't drink any coffee, those who drank four or more cups per day, those who drank one or more cups of decaf daily, and those who drank one or more cups of tea daily. Guess who had the highest incidence of heart attack. Previous studies using a different technique have suggested that four or more cups of coffee increased one's risk of heart attack. But this study found the highest risk in the decaf drinkers! And even a bigger surprise was that next came the non-coffee drinkers, followed by the caffeine club. At lowest risk were the tea drinkers. Actually when the rules of "statistical significance" were applied, there was no significant difference between the coffee drinkers of any amount or type and the non-coffee drinkers. There was however a significant difference for the tea drinkers: their risk was about one-half of those in the other groups. By the way, nobody bothered to ask in this study whether the coffee was Starbucks or Community, or whether it was chickory flavored or dark roasted or whether it was instant or slow dripped. It's no wonder that my patients are confused about matters of nutrition and risk of diseases. I'm confused too. Studies of different designs can yield dramatically different results. That's why I pay little attention to the morning news. Daily reports about this or that causing cancer or preventing cancer, or causing heart attack, or preventing heart attack, or aging, or sexual bliss or whatever are almost always based on a newly released study. How many times have we seen those studies repeated by different researchers and a different conclusion drawn? I'm not saying that research is a waste of time. I'm saying wait! Don't change your whole life-style based on a report in USA Today. If a certain risk factor has over time been repeatedly shown to be associated with a health problem, there will be ample information about it, not a lot of controversy. And yes, there are a number of studies that show that tea has a protective effect against heart attack. Let's see; should it be green tea, or black tea? Ceylon or Darjeeling? How strong? Should it have sugar? Honey? Nutrasweet?.....