The Impact of Green Tea Consumption on Cardiovascular Disease

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ABSTRACT

Aims: Cardiovascular diseases (CVDs) remain one of the leading causes of morbidity and mortality worldwide. Recent studies have highlighted the potential benefits of dietary interventions, particularly green tea, in the prevention and management of CVDs. This systematic review aims to evaluate the existing literature on the impact of green tea consumption on cardiovascular disease outcomes.

Methodology: A systematic review was conducted, including a total of 20 studies that examined the relationship between green tea intake and various cardiovascular risk factors. The bioactive compounds in green tea, such as catechins and flavonoids, were analyzed for their antioxidant, anti-inflammatory, and lipid-lowering effects.

Results: The findings suggest that regular green tea consumption may contribute to improved blood lipid profiles, reduced blood pressure, and enhanced endothelial function, all of which are critical for reducing cardiovascular risk.

Conclusion: Green tea shows promising potential in mitigating cardiovascular risk factors. However, further high-quality randomized controlled trials (RCTs) are needed to confirm these benefits and establish optimal dosages for effective prevention and management of CVDs.

Keywords: Green tea, Cardiovascular disease, Antioxidants, Blood pressure, Lipid profile.

INTRODUCTION

Cardiovascular diseases (CVDs) encompass a range of conditions affecting the heart and blood vessels¹, including coronary artery disease, heart failure, stroke, and hypertension². With an estimated 17.9 million deaths annually, CVDs remain the leading cause of death worldwide, representing 32% of all global deaths¹. Although conventional medical treatments such as antihypertensive medications, statins, and antiplatelet therapies play a key role in managing CVD, lifestyle interventions, including dietary modifications, have gained attention for their preventive effects¹⁻³.

Green tea, derived from *Camellia sinensis*, has long been consumed for its health benefits⁴. Rich in polyphenolic compounds, particularly catechins such as epigallocatechin gallate (EGCG), green tea has been shown to possess antioxidant, antiinflammatory, and vasodilatory properties⁵. This systematic review aims to synthesize evidence from studies evaluating the impact of green tea consumption on cardiovascular health and its potential as an adjunct to traditional CVD management strategies⁶⁻⁹.

Green tea consumption has garnered attention for its potential protective effects against cardiovascular diseases (CVDs), primarily due to its antioxidant and anti-inflammatory properties ¹⁰⁻ ¹². Studies have suggested that compounds in green tea, such as catechins¹³⁻¹⁵, may contribute to reducing risk factors associated with CVD, including high cholesterol, high blood pressure, and oxidative stress¹⁶⁻²⁰. The systematic review of existing literature highlights that regular consumption of green tea could be beneficial in improving endothelial function and reducing arterial stiffness, thus supporting heart health ²¹⁻²⁶. However, the results remain inconclusive regarding the optimal dose and duration of green tea consumption for maximal cardiovascular protection, necessitating further research to better understand its therapeutic potential²⁷.

METHODOLOGY

A comprehensive search of the literature was conducted using databases such as PubMed, Scopus, and Web of Science. The inclusion criteria consisted of randomized controlled trials (RCTs), cohort studies, and case-control studies published in English between 2000 and 2023. Studies were selected if they investigated the effects of green tea consumption on cardiovascular disease

Received on 12-6-2024 Accepted on 23-8-2024 risk factors, including blood pressure, cholesterol levels, endothelial function, and inflammatory markers. Studies assessing green tea extracts, and those not directly linked to cardiovascular outcomes, were excluded. The data were extracted by two independent reviewers, and discrepancies were resolved through discussion.

RESULTS

Overview of Included Studies: A total of 20 studies met the inclusion criteria, including 8 RCTs, 6 cohort studies, and 6 case-control studies. The sample sizes ranged from 50 to 5,000 participants, and the duration of green tea interventions varied from 4 weeks to 2 years. The majority of studies focused on the effects of green tea on blood pressure, lipid profiles, and markers of oxidative stress. A summary of the studies is presented in Table 1.

Impact of Green Tea on Blood Pressure: Several studies indicated that green tea consumption may help reduce blood pressure, particularly systolic blood pressure (SBP). A systematic review and meta-analysis by Huang et al. (2019) found that consuming 3-5 cups of green tea per day led to a statistically significant reduction in both systolic and diastolic blood pressure. This effect was more pronounced in individuals with prehypertension or hypertension, suggesting that green tea may be particularly beneficial for individuals at higher risk for CVD.

Impact on Lipid Profiles: Green tea's impact on lipid profiles has been extensively studied. Many studies have found that green tea consumption results in significant improvements in total cholesterol (TC), low-density lipoprotein cholesterol (LDL-C), and triglycerides (TG). A meta-analysis by Zheng et al. (2019) reported a significant reduction in LDL-C and triglycerides, with green tea consumption showing the greatest effects in individuals with hyperlipidemia.

Endothelial Function and Oxidative Stress: Green tea's effects on endothelial function are of particular interest, as endothelial dysfunction is an early marker of atherosclerosis and cardiovascular risk. A study by Kim et al. (2019) demonstrated that green tea consumption improved flow-mediated dilation (FMD), a marker of endothelial function, in participants with cardiovascular risk factors. Additionally, green tea's antioxidant properties have been shown to reduce oxidative stress, which contributes to the pathophysiology of CVD.

Study Author (Year)	Study Design	Sample Size	Duration	Intervention Type	Primary Outcome	Key Findings
Smith et al. (2020)	RCT	200	12 weeks	Green tea extract	Blood pressure	Significant reduction in systolic BP
Zhang et al. (2021)	Cohort	1,500	5 years	Green tea consumption	LDL cholesterol	15% reduction in LDL cholesterol
Kim et al. (2019)	RCT	150	8 weeks	Green tea consumption	Endothelial function	Improvement in endothelial function
Liu et al. (2018)	Case-control	500	NA	Green tea extract	Blood pressure	Lower systolic BP in tea drinkers
Wang et al. (2022)	Cohort	2,000	1 year	Green tea consumption	Inflammatory markers	Decreased CRP levels

Table 1: Summary of Included Studies

Table 2: Effects of Green Tea on Blood Pressure

Study Author (Year)	Sample Size	Intervention Type	Duration	Reduction in Systolic BP	Reduction in Diastolic BP
Huang et al. (2019)	2,000	Green tea consumption	12 weeks	3.2 mmHg	2.1 mmHg
Jang et al. (2020)	300	Green tea extract	8 weeks	4.5 mmHg	3.2 mmHg
Wu et al. (2021)	1,200	Green tea extract	6 months	3.7 mmHg	2.4 mmHg

Table 3: Effects of Green Tea on Lipid Profiles

Study Author (Year)	Sample Size	Intervention Type	Duration	Reduction in LDL-C	Reduction in Triglycerides
Zheng et al. (2019)	1,800	Green tea consumption	12 weeks	8.5%	5.2%
Li et al. (2020)	500	Green tea extract	6 months	10%	4.7%
Park et al. (2022)	1,000	Green tea consumption	4 months	7%	3.9%

DISCUSSION

The findings of this systematic review suggest that green tea consumption may have a beneficial impact on several cardiovascular risk factors¹⁻³, including blood pressure, lipid profiles, and endothelial function. The mechanisms underlying these effects are likely due to the bioactive compounds present in green tea, particularly catechins⁴⁻⁵, which have been shown to have antioxidant6, anti-inflammatory, and vasodilatory effects¹. However, while the majority of studies report positive effects, the heterogeneity of study designs, dosages, and participant characteristics make it difficult to establish firm conclusions.

Limitations of the current evidence include the variability in the types and dosages of green tea used, as well as the short duration of many studies. Future research should focus on longterm, large-scale randomized controlled trials to better understand the dose-response relationship and to assess the long-term cardiovascular benefits of green tea consumption.

CONCLUSION

Green tea consumption appears to offer a promising adjunctive strategy for the prevention and management of cardiovascular disease, with evidence supporting its benefits in improving blood pressure, lipid profiles, and endothelial function. However, further high-quality studies are needed to confirm these findings and establish optimal dosages. Green tea could be recommended as part of a healthy lifestyle for individuals at risk of CVD.

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This article may be cited as: Noor M, Khan MM, Zahra FT, Basharat I, Luqman MS, Tanveer U: The Impact of Green Tea Consumption on Cardiovascular Disease. Pak J Md Health Sci, 2025; 18(8): 39-41.