Increasing asthma incidence, prevalence and morbidity over recent decades presents a significant challenge to public health in developing countries. A number of studies have suggested that ambient air pollution can trigger asthma attacks. In this study we examined the effect of cooking smoke on reported prevalence of asthma among adult men and women in India. Analysis is based on 99,574 women and 56,742 men age 20–49 years included in India’s third National Family Health Survey conducted in 2005–2006. Effects of exposure to cooking smoke, determined by type of fuel used for cooking on the prevalence of asthma were estimated using multivariate logistic regression after controlling for age, marital status, education, religion, caste/tribe, house type, place of cooking, persons per room, living standard of the household, urban/rural residence and geographic region. Women living in households using biomass and solid fuels have a significantly higher prevalence of asthma (OR 1.26; 95% CI 1.06 to 1.49) even after controlling for the effects of a number of confounding factors. Interestingly, this effect was not found among men (OR 0.98; 95% CI 0.77 to 1.24). However, tobacco smoking was associated with a higher asthma prevalence both among women (OR 1.72; 95% CI 1.54 to 2.11) and men (OR 1.35; 95% CI 1.49 to 2.25). The findings have important program and policy implications for India, where large proportions of the population rely on polluting biomass and solid fuels for cooking and space heating. More epidemiological research with better measures of smoke exposure and clinical measures of asthma is needed to validate the findings.

**Conclusion** Daily or weekly fish intake is associated with higher risk of diabetes among Indians, warranting further investigation. More epidemiological research with better measures of fish intake and clinical measures of diabetes is needed to validate the findings.

**Methods** Secondary analyses of population-based standardised individual level data of 3586 participants. Differences in prevalence ratios (PR) of DM were estimated using regression models.

**Results** Indian and African-Caribbean populations had higher prevalence rates of diabetes than Whites in both countries. In cross-country comparisons, similar to Whites, English-Indians had a lower prevalence of diabetes than Dutch-Indians; the difference in women remained after adjustments for other covariates (PR=0.35, 95% CI 0.22 to 0.55). English-African women also had a lower prevalence of diabetes than Dutch-Africans (PR=0.43, 95% CI 0.20 to 0.89). For African men the difference was small (p=0.249).

**Conclusion** These findings suggest that the increasing prevalence of diabetes following migration may be modified by the context in which ethnic minority groups live.
Higher fish intake is associated with the risk of type 2 diabetes in adult Indian population

S Agrawal and S Ebrahim

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