## SP1-38 | PREVALENCE OF ADL AND IADL DEPENDENCE AND ASSOCIATED FACTORS IN ELDERS LIVING IN LONG-STAY INSTITUTIONS IN BRAZIL

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**Introduction** Health conditions and functionality problems related to ageing affect the ability to live independently, leading to the placement of elders in a long-stay institution. This phenomenon has been increasing in Brazil. This study analyzes functional dependence and its associated factors in this population group.
**Methods** This is a cross-sectional study with elderly residents of long-stay institutions in four Brazilian cities. The study's questionnaire included socio-demographic and health-related variables and the assessment of functioning, cognition and mood with scales widely used in elderly populations. The population profile was characterised and the prevalence of dependence in activities of daily life (ADL) and instrumental activities of daily life (IADL) was estimated. Bivariate and multivariate analyses were performed with Poisson regression.
**Results** These are preliminary results for 340 elders. The mean age was 75.5 years, most were men, 0—4 years of schooling and <5 years of institutionalisation. ADL dependence was 40.0% and IADL 58.5%. Female (PR 2:41, 95% CI 1.84 to 3.17), 80 or more years (PR 3.35; 95% CI 1.37 to 8.17), with very poor/poor health (PR 3.28; 95% CI 1.23 to 8.72) and cognitive impairment (PR 2.66; 95% CI 1.19 to 5.95) had high probability of dependence in ADL. Female (PR 3.55; 95% CI 2.31 to 5.45), 80 or more years (PR 5.47, 95% CI 2.26 to 13.25), illiterate (PR 4.89, 95% CI 2.54 to 9.43) and with cognitive impairment (RP 2.55; 95% CI 1.14 to 5.73) had high probability of dependence in IADL.
**Conclusions** The high prevalence of functional dependence indicates the need for social and healthcare public policies aimed at this specific group in Brazil.

## SP1-39 | SOCIODEMOGRAPHIC HETEROGENEITIES ASSOCIATED TO BREAST CANCER STAGE: A HOSPITAL-BASED CANCER REGISTRY STUDY IN RIO DE JANEIRO, BRAZIL

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**Introduction** Early detection and diagnosis of breast cancer (BC) in important for subsequent treatment and prognosis. The aim of this study was to identify and sociodemographic differences in Brazilian BC patients.
**Methods** Data from 1651 female BC patients included in the Brazilian Cancer Institute's Hospital-Based Cancer Registry in 2007 were analysed using $\chi^2$ test and Logistic Regression).
**Results** The average age was 57.3 (SD=13.9, range 19—98). Nearly 42.0% (n=689) from patients had localised BC, 46.5% (n=768) had locally advanced BC (LABC) and 11.8% (n=194) had metastatic BC. In a multivariated analysis, the LABC group had a number of significant findings. The odds of LABC for younger women (<40 years) were almost 60% higher (OR 1.57, 95% CI 1.03 to 2.40) than older women (≥70 years). The odds of LABC among illiterate women were 2.29 (95% CI 1.50 to 3.50) and 1.44 (95% CI 1.16 to 1.79) for women with <9 years of schooling compared to women with ≥9 years of schooling. No racial differences were observed.

**Conclusion** The lower education findings suggest that poor access to diagnosis may be involved in LABC, as well as cultural factors and lack of health literacy. Also, the young age of patients with LABC suggests that clinical and biological tumour characteristics and familial history of cancer in this group should be examined in further studies.

## SP1-40 | MATERNAL MENTAL HEALTH AND SOCIAL SUPPORT: EFFECTS ON ATOPIC AND NON-ATOPIC ASTHMA IN CHILDREN

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**Introduction** Although there is evidence that atopic and non-atopic asthma have distinct risk factors and immunological mechanisms, there are few studies that consider the effect of psychosocial factors on these asthma phenotypes. We aimed to identify if the effects of common maternal mental health disorders and the presence of family social support on asthma occurrence in children.
**Methods** A cross-sectional study including 1042 children from an inner city area of Salvador in the state of Bahia, Brazil (part of the SCAALA Program—Social Change, Allergy and Asthma in Latin America). Psychosocial data were collected through personal interview using SRQ-20 and Social Support Scale form Medical Outcome Study. We collected blood samples to measure allergen-specific IgE and we obtained socioeconomic and asthma data using the ISAAC questionnaire. We used polytomous regression analysis to estimate associations between maternal mental health, social support and atopic and non-atopic asthma. Effect modification was tested through polytomous regression analysis stratified by social support levels.
**Results** Maternal mental health had the same impact on atopic and non-atopic asthma, even after adjusting for confounding. Affective, material and informational supports have protective effects on non-atopic asthma only, and it seems that affective and material supports act as a buffer for the impact of maternal mental health disorders on non-atopic asthma.
**Conclusions** Maternal mental health affects asthma independently of biologic and environmental risk factors, and its effect is attenuated when the mother had affective and material social supports.

## SP1-41 | FIVE-YEAR SURVIVAL OF PATIENTS WITH NON-HODGKIN'S LYMPHOMA SUBMITTED TO HAEMATOPOIETIC STEM CELL TRANSPLANTATION IN A REFERENCE CENTRE IN BRAZIL

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**Introduction** Since the '90s, haematopoietic stem cell transplantation (HSCT) is being used more frequently in the treatment of patients with non-Hodgkin's lymphoma (NHL).
**Methods** This study was conducted in a historical cohort of adult patients with NHL undergoing first HSCT in a referral hospital in Rio de Janeiro (1997—2009). The Kaplan—Meier method was used for comparison between strata of covariates and Cox regression for multivariate analysis.
**Results** In the study period 100 patients underwent HSCT. Of these, 61 were male, with a median age of 45. Predominant subtype at transplantation was Diffuse Large B Cell Lymphoma (82%). The median time between diagnosis and transplantation was 17 months. At 5 years, the probability of overall survival was 50.8% and survival free of evidence of disease was 54.2%. Patients with advanced stage (III/IV) at diagnosis (61.9% vs 31.8%); those with bulky disease

(60.6% vs 36.7%) and those without evidence of disease at 12 months post transplantation (67.5% vs 5.7%) had higher survival. In multivariate analysis, evidence of disease at 12 months after HSCT (HR 5.22), chemo-sensitivity to the last regimen (HR 6.81) and systemic symptoms (HR 2.60) were associated to survival. **Conclusions** We found that the most well recognised disease characteristics and overall survival in this cohort were similar to those found for patients with NHL undergoing haematopoietic stem cell transplantation in other countries.

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SP1-42 | **PREVALENCE OF OVERWEIGHT AND ASSOCIATED FACTORS IN UNDER-5-YEAR-OLD CHILDREN IN BRAZIL**

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**Introduction** The aim of the study was to determine the prevalence of overweight among under-5-year-old children in Brazil and investigate its associations with sociodemographic characteristics, exclusive breastfeeding, number of siblings and birth weight.
**Methods** Cross sectional population based study, conducted in the five geopolitical regions of Brazil, with a sample of 6397 children. The nutritional classification was done using the 2006 WHO growth curves. Were considered overweight the children with a z-score higher than two SDs above the weight for height median.
**Results** The prevalence of overweight among under-5-year-old children in Brazil was 12%. The outcome was 22% higher in males (RP=1.22; 95% CI 1.02 to 1.47; p=0.030). There was a linear inverse association: the younger the child, the higher the prevalence of overweight (p=0.032). The white children had a prevalence of overweight 22% higher than the non-white ones. The higher the birth weight, the higher the prevalences of overweight (p=0.000). Children who were breastfed up to 120 days had a prevalence of overweight 34% higher compared to the ones who were breastfed for more than 120 days.
**Conclusion** The prevalence of obesity was higher in males, in under-1-year-old, white, with a birth weight of <3500 g, exclusively breastfed up to 120 days children.

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SP1-43 | **CLASS-BASED RESIDENTIAL SEGREGATION AND SOCIOECONOMIC DISPARITIES IN ASTHMA PREVALENCE**

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Socioeconomic disparities in asthma prevalence are well established in the US. Evidence suggests environmental factors may play a role, but no studies have examined the role of class-based residential segregation. We investigated whether class-based residential segregation attenuated the association between individual-level income and asthma prevalence among 164 143 non-Hispanic (NH) white, 19 493 NH black, and 14 399 Hispanic participants of the 2009 Behavioural Risk Factor Surveillance System aged 18 years and older. Current asthma was based on self-report. Class-based segregation was measured at the metropolitan level using the poverty isolation index, a measure of the extent to which individuals with incomes below the poverty threshold are spatially isolated from non-poor individuals. Each metropolitan area was given an index score ranging from near 0 to 1, with lower scores indicating less segregation. Among blacks, odds of asthma was 0.84 times lower per quartile higher income (95% CI 0.77 to 0.91) after adjusting for age and gender. However, this association varied by level of segregation (p for interaction=0.07). Income was more weakly associated with odds of current asthma at low segregation (10th percentile; OR 0.90; 95% CI 0.78 to 1.03) vs high segregation (90th percentile; OR 0.74; 95% CI 0.66 to 0.82). For whites, income was also inversely associated with odds of current asthma, but adjustment for segregation did not attenuate this relationship. Neither income nor segregation was associated with current asthma among Hispanics. These findings suggest that among blacks, class-based segregation may help explain individual-level income disparities in asthma prevalence.

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SP1-44 | **ASSOCIATION BETWEEN ALLERGIC DISEASES AND NUTRITIONAL STATUS AMONG CHILDREN IN BANGLADESH**

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**Introduction** Interest has been arisen whether nutritional status is related to development of allergic diseases in children. Our aim was to investigate the association between nutritional status and serum IgE level in the developing country.
**Methods** This cross-sectional study was nested into a large scale nutrition intervention trial among pregnant women in rural Bangladesh. In this follow-up study, we collected venous blood to measure serum total and specific IgE. Serum total IgE was measured by human IgE quantitative ELISA. And IgE specific to dust-mite and ascaris were measured by the CAP-FEIA system. Weight and height have been measured and stunting, wasting, under weight and overweight were calculated by WHO Anthro. Specific IgE >0.70 UA/ml was considered as positive.
**Results** A total of 912 children of 4.5 years of age was successfully completed the study. Anthropometric indicators revealed wasting in 17%, stunting in 32%, underweight in 41% and overweight in 0.2% of the children. Log total IgE was 2.69+0.27 IU/ml (mean+SD). Mean anti-DP specific IgE was 3.33 (range: 0.00−>100) UA/ml. Mean anti-ascaris specific IgE was 11.89 (range: 0.00−>100) UA/ml. Stunting was significantly associated with increased total IgE (OR (95% CI) 1.59 (1.01 to 2.50)) and anti-ascaris IgE (OR (95% CI) 1.65 (1.18 to 2.29)). The association remained statistically significant after adjustment for mother's BMI, sex, health status and current illnesses (p=0.044 and p=0.003 respectively).
**Conclusion** The total and specific IgE level was high among children in Bangladesh. Nutritional status had an association with increased total and anti-ascaris IgE antibody.

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SP1-45 | **PREVALENCE OF DEPRESSION IN PATIENTS WITH IDIOPATHIC PARKINSON'S DISEASE IN KOREA**

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**Introduction** Depression is one of the most common non-motor symptoms of Parkinson's disease (PD). The prevalence rates vary widely according to the diagnostic criteria. However, in Korea, there are very few epidemiologic data concerning the prevalence of depression in PD. The aim of this study is to investigate the prevalence of depression and factors influencing depression in patients with PD.