Action" document. An Aboriginal community member also wrote a culturally aligned, plain language version.

Results In 6 months, peer-supported recommendations were developed and broadly disseminated to stakeholders locally and nationally. The "Call To Action" was distributed to stakeholders via facilitated discussions, presentations, email, and internet. A follow-up survey of stakeholders will be conducted to assess the impact of our dissemination approach. The intended outcomes will include increased awareness, knowledge, and investment in evidence-informed strategies as recommended in the "Call To Action".

Conclusions The approach undertaken provided timely research evidence for policy makers. Other than raising awareness, the impact of this approach remains to be determined.

SP3-75   TRAINING IN EPIDEMIOLOGY IN EUROPE

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Training in Epidemiology in Europe is evolving. The European Epidemiology Federation IEA-EEF felt the need to know more about existing training possibilities and therefore conducted a survey "Degrees in Epidemiology" with the aim to create an inventory of academic institutions offering formal training in Epidemiology.

Methods Online Survey starting in April 2010, still going on.

Results Up to December 2010 eleven universities gave information on programs leading to an MSc and/or PhD in Epidemiology. Several programs started between 2006 and 2008. We estimate, that there are more than 300 students enrolled each year in European programs. An update of this survey will be presented at the conference.

Conclusion When for many years the possibilities to study Epidemiology in Europe were restricted to very few well known places and many students went overseas, there are now increasing possibilities to study epidemiology "at home". This may help to strengthen our discipline.

SP3-76   INCIDENCE AND PERSISTENCE OF OBESITY IN BRAZILIAN ADULTS FROM BODY MASS INDEX AT END OF ADOLESCENCE

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Introduction The prevalence of obesity has increased among adults living in developed or developing countries. In Brazil, obesity among adults reached at least 10% of population in 2008—2009. This study estimates the incidence and persistence of overweight or obesity in adults according to nutritional status at end of adolescence.

Methods Former and present self-reported anthropometric data come from VIGITEL 2006 to 2009 (acronym in Portuguese for System of Health Surveillance by Phone) and include 61 985 cases from individuals aged 21 to 39 years. Nutritional status was classified according to WHO systems. The RR for obesity was calculated according to level of education.

Results For individual with normal BMI at 20 years incidence of overweight is 40% among male and 30% among female. For individuals with pre-obese BMI at 20 years the incidence of obesity is 5.4 higher among male and 4.7 higher among females than that for normal BMI at 20 years. Persistence of overweight is estimated in 91% of males and 81% of females. For individuals with pre-obese BMI at 20 years the incidence of obesity is 5.4 higher for males and 4.7 higher for females than that for normal BMI at 20 years.

Persistence of obesity from 20 years to present is about 60% among males and 49% among females. RR of present obesity among college degree vs <4 years of school education, both with normal BMI at 20 years, is 0.56 for males and 0.26 for females.

Conclusion Higher level of education is associated with a lower incidence and persistence of obesity among adults, especially among females.

SP3-77   PROCESSED MEAT CONSUMED BY BRAZILIAN ADOLESCENTS: AN ANALYSIS ACCORDING TO TRAFFIC LIGHT LABELLING

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Introduction The consumption of processed foods is associated with chronic diseases and obesity. Despite nutritional information on the label being mandatory in Brazil, this information is poorly understood by the population. The use of Traffic Light Labelling (TLL) may be a good alternative to help consumers with their choices. This study analysed processed meats consumed by Brazilian adolescents according to the UK regulation (TLL).

Methods In 2008, a population-based survey was conducted in São Paulo, Brazil. Dietary data from 170 adolescents were obtained through one 24-h dietary recall. The TLL uses traffic light signals: red (high), yellow (medium) and green (low), to represent the percentages of sugar, total and saturated fat and salt in pre-packed foods. The content of salt, total and saturated fat was calculated for processed meats consumed.

Results The processed meats represented 27% of total meat consumed. Almost 80% of processed meats had more sodium and 50% more saturated and total fat than the maximum recommended by TLL regulations, for example, bacon has more than four times the amount of sodium and twice the amount of total and saturated fat than TLL. The most frequently consumed processed meats were pork sausage, hamburger, nuggets, mortadella and sausage. Among these foods, pork sausage, nuggets, mortadella and sausage should be presented with a red colour on the packet for the all nutrients and the hamburger should be yellow, indicating which of these foods should be avoided.

Conclusion These results emphasise the need for specific regulation for processed foods, especially processed meats in order to avoid the burden of chronic diseases.

SP3-78   VALIDITY AND REPRODUCIBILITY OF A FOOD FREQUENCY QUESTIONNAIRE DEVELOPED BASED ON A REPRESENTATIVE SAMPLE OF ADOLESCENTS FROM SÃO PAULO, BRAZIL

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Introduction The food frequency questionnaire (FFQ) has been one the most widely used method for assessment of food consumption, as well as being able to provide the usual intake, is considered easy to use and of low cost.

Objective To assess the validity and reproducibility of a quantitative FFQ with 66 food items (QFFQ) developed based on a representative sample of adolescents from São Paulo, Brazil.

Methods 250 adolescents filled two FFQ (1-year interval) and 5 24-h recalls (3-month interval) as part of a population-based survey conducted in São Paulo, Brazil, in 2007. To quantify the nutrient intake, the software Nutrition Data System for Research was used.