

**Conclusion** Although there has been substantial focus up to now on the role that increased mortality amongst the oldest groups has played in the recent life expectancy trends, more attention needs to be paid to the role that the slowdown in improvement for circulatory causes across a much wider age group has played, as well as the importance of rising drug-related deaths in younger adults. Future research should seek to explain the changes in mortality trends for all age groups and causes of death and policymakers should act to protect the social security system and public services that are likely to be part of the causes of the recent trends.

**P38 RISK AND PROTECTIVE FACTORS FOR PSYCHOTIC EXPERIENCES IN ADOLESCENCE: A POPULATION-BASED STUDY**

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10.1136/jech-2019-SSMabstracts.189

**Background** Psychotic experiences (PEs) are reported by a significant minority of adolescents and are associated with the development of schizophrenia and other psychiatric disorders in adulthood. Few modifiable protective factors have been identified to date. The aims of this study were to examine associations between a range of psychopathological, adverse life event, coping and social support factors and PEs in a general population sample of Irish adolescents.

**Methods** Cross-sectional data were drawn from the Irish centre of the Saving and Empowering Young Lives in Europe (SEYLE) study (German Clinical Trials Registry, DRKS00000214). Students were administered a classroom-based self-report questionnaire and 973 adolescents, of whom 522 (53.6%) were boys, participated. Psychotic experiences were assessed using the 7-item Adolescent Psychotic Symptom Screener.

**Results** Of the total sample, 81 (8.7%) of the sample were found to be at risk of PEs. A wide range of factors from adverse life event, lifestyle and mental health domains had crude associations with PEs, while parental support was associated with lower prevalence of PEs. In multivariate analysis, independent associations were found between PEs and the number of adverse life events experienced (OR: 1.61; CI: 1.29–2.02;  $p < 0.0005$ ) as well as maladaptive/pathological internet use (OR: 2.60; CI: 1.15–5.89;  $p = 0.02$ ). Positive parental support was associated with reduced risk of PEs after adjustment for established risk factors (OR: 0.40; CI: 0.18–0.90;  $p = 0.03$ ) and so offers a potential protective role.

**Conclusion** These findings can inform the development of optimal interventions for adolescents at risk of psychopathology and their families.

**P39 MEAT, FRUIT AND VEGETABLE CONSUMPTION IN SUB-SAHARAN AFRICA: A SYSTEMATIC REVIEW AND META-REGRESSION**

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10.1136/jech-2019-SSMabstracts.190

**Background** The dietary choices we make affect our personal health and have consequences for the environment, both of which have serious implications for the 2030 Sustainable Development Agenda. There is a strong consensus that cutting on meat and dairy products in favour of fruit and vegetables and other plant-based diets would offer dual health and environmental benefits. In global reviews, the literature on meat, fruit, and vegetable consumption in sub-Saharan Africa (SSA) is limited. It is therefore essential to quantify meat, fruit, and vegetable consumption in sub-Saharan African populations.

**Methods** We systematically searched six databases to identify studies reporting meat, fruit and/or vegetable consumption in sub-Saharan African populations. Using STATA SE version 15, random effects meta-regression analyses were used to test the effect of year of data collection and method of data collection on population meat, fruit, and vegetable consumption. We also tested any association between age, sex, urban/rural residence or a country's economic development, and population intake of meat, fruits and/or vegetables.

**Results** Richer SSA countries were likely to consume more meat ( $\beta = 36.76$ ,  $p = 0.04$ ) and vegetables ( $\beta = 43.49$ ,  $p = 0.00$ ) than poorer countries. Vegetable intake has increased dramatically over the last three decades from  $\approx 10$  g to  $\approx 110$  g ( $\beta = 4.43$ ,  $p = 0.00$ ). Vegetable ( $\beta = -25.48$ ,  $p = 0.00$ ) consumption was higher in rural than urban residents. Although the trend of meat consumption has gone up ( $\approx 25$  g to  $\approx 75$  g), the trend is non-significant ( $\beta = 0.63$ , N.S.). Daily average per capita meat consumption was however above recommended 70 g, while fruit and vegetable consumption remain below WHO's recommendation, though consumption of both fruit and vegetable has increased over the last three decades. No clear differences in consumption were noticed between sexes.

**Conclusion** While dietary changes in SSA may offer the large absolute benefits, consideration of the magnitude of dietary change, particularly increasing meat consumption, will need to occur to ensure policy and interventions support the reduction of under-nutrition and micronutrient deficiencies without worsening NCD prevalence and environmental impacts.

**P40 PREDICTING TYPE 2 DIABETES DEVELOPMENT AMONG PATIENTS IN GENERAL PRACTICE – A PROSPECTIVE ANALYSIS COMPARING METABOLIC SYNDROME DEFINITIONS AND COMPONENTS**

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10.1136/jech-2019-SSMabstracts.191

**Background** A definition of metabolic syndrome (MetS) has been recommended as a tool to help identify individuals at risk of developing type 2 diabetes. However, an agreed