threshold probability of 20% to predict cardiovascular diseases in a population-based cohort of 6224 Iranians aged 30–74 years with 10-year follow-up.

**Results**
Dividing NB by incidence resulted 17% and PAF shows 43% decrease in incidence, but NBF shows just 8% advantage for treatment according to the model.

**Conclusion**
NBF seems to be a challengeable issue in policy making using risk functions.

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**P1-190** SOCIAL DETERMINANTS OF CARDIOVASCULAR DISEASE BIOMARKERS: INVESTIGATING A SWEDISH MALE COHORT AT AGES 50 AND 70

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**Background**
Social status is associated with cardiovascular disease (CVD) prevalence and incidence. We aimed to study relationships between i) socioeconomic position (SEP) and common CVD biomarkers; cholesterol, LDL/HDL, ApoB/ApoA1 and adiponectin ii) SEP and CVD mortality in a Swedish-population-based sample, and to assess if these associations changed with age.

**Design**
A longitudinal cohort study of men born 1920–24 with 36 year’s follow-up was analysed by Cox regression.

**Methods**
Of 2322 men that participated in an investigation at age 50, 1221 attended a reinvestigation at age 70. SEP was measured as occupational class and educational level. Linear regression (adjusted for age, body mass index and physical activity) was used to study associations between SEP and CVD biomarkers. CVD mortality over 36 year’s follow-up was analysed by Cox regression.

**Results**
At age 50: We found significant inverse associations of education and occupational group with mean cholesterol levels, whereas LDL/HDL ratio was associated with education only. These were statistically significant after adjustment for covariates. No significant associations were found between either measure of SEP and ApoB/ApoA1 ratio. At age 70: No significant associations were found between either measurement of SEP and any biomarker studied. Men classified as highest educated and non-manual had decreased risk for CVD mortality during follow-up.

**Conclusions**
Associations of SEP with cholesterol levels and LDL/HDL ratio that exist at age 50, are no longer found in the same type of injury. The signiﬁcant regional variation was found according to the model. The statistically signiﬁcant linear trend was found across the quartile of poverty index (p for trend = 0.04).

**Discussion**
There were signiﬁcant regional variations according the rurality, administrative regions, and the Korea poverty index. For the tackling the high prevalence and regional discrepancy of the injury, community specialised and area based intervention were needed.