
Results Stressful life events (social or psychological conditions) in childhood were associated with the occurrence of a depression in 2010 (RMSEA=0.079; NFI=0.94). After including these events in a fully adjusted model, they were associated with a lack of social support in 2005, which in turn was associated with depression 5 years later, but with a different magnitude according to individuals and/or neighbourhood SES.

Conclusion Identification of pathways and buffers between stressful life events in childhood and depression in adulthood contributes to the knowledge for a comprehensive model of the intergenerational transmission of social inequalities in mental health and could guide the mental health public policies in specific sub-groups of population.

**P1-311 LYMPHOHEMATOPOIETIC CANCERS AND BENZENE: A POOLED ANALYSIS OF PETROLEUM WORKERS**

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Introduction There are few quantitative studies on the effect of relatively low benzene concentrations on risks of specific lymphohematopoietic cancer subtypes. Three nested case-control studies among petroleum workers in Australia, Canada and the UK have been updated and pooled to provide greater precision.

Methods To improve disease subtype classification, pathology records were obtained; two pathologists reviewed these and classified every case according to traditional and WHO classification schemes. Quantitative exposure estimates were also compared across studies to ensure that any differences in these estimates were justified. Statistical analyses employed conditional logistic regression models with flexible penalised cubic regression spline components.

Results Updates identified 170 additional cases giving a total of 370, sufficient for separate analyses by leukaemia subtypes, myelodysplastic syndrome (MDS), and myeloproliferative disease (MPD). Review of source records by pathologists resulted in changes to the underlying disease subtypes for certain leukaemia cases; pre-existing exposure assessment. Dose-response results from the updated pooled data for MDS, MPD, AML and chronic myeloid leukaemia (AML) tended to increase as categorical benzene exposure increased when pooling the original data from the previously published studies using both the original and revised exposure assessment. Dose-response results from the updated pooled data for MDS, MPD, AML and chronic myeloid leukaemia, and chronic lymphoid leukaemia will be presented from the updated dataset.

Conclusions This pooled study benefited from careful reconsideration of benzene exposure estimates and disease classification procedures, improving the precision of risk estimates of benzene exposure for leukaemia and other disease subtypes.