**Conclusion** Such a high rate of premature mortality not only reflects social vulnerability, but also reveals the failure of intersectoral policies to control a situation that affects the prospects of adolescents, their families, and society as a whole. Epidemiological knowledge must translate to ethically oriented approaches by healthcare managers and governmental policymakers in order to minimise these deaths, which represent a serious health hazard and social disease in Brazil.

**Methods**

**Introduction** Increasing prevalence of obesity worldwide reinforces the importance of studying weight-loss habits of the population. It is known that lifestyle modifications (LSM) should be the mainstay of overweight treatment and that use of drugs should be considered adjuvant in the process. Despite weight-loss attempts being common practices and Brazil being considered a major consumer of anorectic drugs, population-based studies are still scarce.

**Results** Data were collected from 2732 individuals, with a rate loss of 10.3%. Overall prevalence of anti-obesity agents use was 4.8% (4.0 to 5.7), being higher in women (7.3%, CI 6.0 to 8.6) and among those of higher schooling (9.3%, CI 7.0 to 11.7). Drugs mainly used were: sibutramine (45.5%) amphetamines (31.8%) and herbal medicines (25.0%). Weight-loss formulae containing combinations of drugs, illegal in Brazil, were reported by 6.1% of users. Only 39.4% of drugs users referred to add dietary changes and regular exercise, and 47.0% slimming teas.

**Conclusion** Despite the regulations, medical prescription was just reported by 49.6% of the users. Moreover, we found a high prevalence of weight-loss attempts in the last year and identify substances most commonly used.

**Results**

**Introduction** Ischaemic heart disease (IHD) is one of the leading causes of disability and death in women in their 60s. However, the accuracy of capturing IHD in women using hospital admission records unclear.

**Methods** The aim of this study is to validate the occurrence or absence of IHD in HES records in Million Women Study participants using general practice records. A random sample of 1000 women with a hospital record including an IHD diagnosis (ICD I20–I25) and 1000 women with no such admission (controls) were selected. We wrote to each woman’s registered general practitioner (GP) asking for confirmation of an IHD diagnosis or not. Each GP was asked to complete a study form, supply relevant hospital documents and return these in a prepaid reply envelope. For each admission, HES data will be compared with GP data.

**Results** Response rates were 83% for IHD and 88% for controls. Results will include analysis of the agreement between general practice medical records and HES admissions data for both cases and controls. The implications of using administrative datasets for epidemiological research outcomes will be discussed.

**Conclusion** As the ever-increasing number of baby boomers is entering the retirement years, the number of elderly population is expected to increase. We estimated that the long term risk of HZ among people over age of 60 years is higher than previously expected. It may be prudent to suggest prevention measures such as vaccination to reduce the risk of HZ in this population.