**P1-404 THYROID CANCER INCIDENCE IN BRAZIL: AN APPROACH USING POLYNOMIAL MODELS**

Introduction Thyroid cancer represents almost 1% of malignant neoplasms, corresponding to 0.5% of total deaths caused by cancer. Despite a low and progressive reduction in mortality rate, thyroid cancer is a public health issue because of its increasing incidence, as shown in various studies worldwide.

Methods This ecological study to estimate thyroid cancer incidence according to age and sex in Brazil in 2006. We employed polynomial models, which take into account age and birth cohort effects in estimate process.

Results We estimated 6066 new cases of thyroid cancer, of which 1065 among men and 5001 among women. The incidence rates according to age for both sexes, especially from 30 years old onwards.

Conclusion The rates’ magnitude and profile according to age and sex suggest the method employed yields plausible estimates.

**P1-406 CHARACTERISTICS OF INDIVIDUALS “LEFT BEHIND” IN DEPRIVED AREAS IN SCOTLAND**

Introduction Previous work in Scotland has shown that within deprived areas, declining populations have higher illness and mortality rates than stable or increasing populations. One possible explanation is that as healthy individuals move out, they are replaced by individuals in poorer health or not replaced at all, producing areas with higher concentrations of poor health. Little is currently known about the characteristics of migrants to and from these deprived areas or the populations remaining.

Methods Using data from the Scottish Longitudinal Study (SLS), which links individual level Scottish census data to vital events, we examine the socio-demographic characteristics and health status of individuals aged 16–74 who moved in and out of deprived areas with declining populations in the year prior to the 2001 census. We also examine the characteristics of those left behind.

Results 1771 SLS members remained living in a deprived, declining area while 242 individuals moved in and 466 moved out. Compared to the residentially stable, those moving were more likely to be from a non-White ethnic group (p < 0.001), unemployed but seeking work (p = 0.001) and single (p < 0.001) while those who moved out were more likely to be from a higher social class (p < 0.001). Rates of poor general health, long term illness and some causes of death were highest for those who remained in these areas.

Conclusion People who remain in deprived and declining areas have a different socio-demographic and health profile from those who move into and out of these areas; non-migrants were in worst overall health.

**P1-407 THE EMERGING EPIDEMIC OF OBESITY IN PUNJAB (INDIA): A POPULATION BASED STUDY**

Introduction Obesity is a complex, multifactorial chronic disease involving genetic, physiological, metabolic, behavioural, psychological and environmental components. The global epidemic of overweight and obesity—“globesity”—is rapidly becoming a major public health problem. It has reached epidemic proportion in India in the 21st century.

Methods The present population based study has been conducted in rural and urban areas of Ludhiana district, Punjab State (India). The study included 1615 Punjabi adults comprising 875 from rural and 740 from urban area. Demographic variables (age, sex, SES, lifestyle) and anthropometric parameters—height, weight, waist circumference and hip circumference were recorded. Biochemical analysis viz. cholesterol, Na and K were also done.

Results Out of 1615 subjects, 44% were males and 56% were females. Half of the subjects were in the age group of 20–40 years. Overall prevalence of overweight and obesity has been found be 18.8% and 46.6%, respectively. Prevalence of obesity is slightly higher in rural subjects than the urban. The percentage of obese subjects is 54%, 55.35% and 56.44% in the age groups of ≤30 years, 31–40 years and 41–50 years, respectively. Prevalence of obesity has been computed in relation to sex, SES and lifestyle. Serum