and brown—OR: 1.1 to 0.9; 1.5). These estimates were not significantly altered in models including variables related to life-course SEP.

**Conclusion** In this Brazilian population, UL risk increased with the darkening of skin colour, and the life-course SEP did not mediate this association.

### P1-418 PREVALENCE OF DENTAL PAIN AND ASSOCIATED FACTORS AT 5 YEARS OLD: FINDINGS FROM A BRAZILIAN BIRTH COHORT

**Introduction** Despite dental pain being an important public health issue, very few studies have investigated its occurrence in preschool children using a life course approach. The objective of this study was to describe the prevalence of dental pain in preschool children and its association with life course characteristics.

**Methods** This study was nested in a population-based birth cohort from Pelotas, Brazil, started in 2004. A sample of 1129 children aged 5 years old underwent dental examination and their mothers were interviewed. Exploratory variables included sociodemographic factors, maternal oral health status and associated behaviours, and children’s primary dental caries. Data were analysed using multivariable Poisson regression.

**Results** Toothache was present in 16.5% of the population in the 6 months prior to interview. Adjusted analyses showed that dark-skinned children [Prevalence ratio (PR)=1.6 (95% CI 1.1 to 2.4)], from low economic level [PR 1.9 (1.2 to 3.0)], whose mothers had <4 years of study [PR 1.9 (1.0 to 3.6)], and whose mothers with <10 teeth in one arch at least [PR 1.66 (1.09 to 2.53)], and those with high caries prevalence at age 5 years [PR 4.8 (3.5 to 7.1)] were associated with dental pain.

**Conclusions** Low family income and lack of children’s schooling are the main early life risk factors for dental pain in preschool children. Poor maternal and child dental status are associated with dental pain. The socioeconomic and family context in which dental pain occurs should be taken into account when dental pain preventive measures are implemented.

### P1-419 HEALTH PROMOTING SCHOOL INITIATIVE IN ASHRAM SCHOOLS OF WARDHA DISTRICT: AN EVALUATION

**Objective** To study the effect of health promoting school-based intervention for disadvantaged children in the residential Ashram Schools of rural Wardha district of central India.

**Material and Methods** At baseline, 1287 children in 10 Ashram schools were examined using locally adopted Global School-based Student Health Survey questionnaire. Ashram (residential) schools are residential schools providing lodging and boarding, uniforms, books and notebooks and educational equipments to its poor inmates. It covered information on personal hygiene, physical status, nutrition, environment, substance abuse, risk behaviour, life skills and others. Haemoglobin examination of all children was done by using Haemoglobin colour scale. Body Mass Index (BMI) and Physical activity score for each child was calculated. Intervention was carried out through trained school health committee members. After 1 year, 1226 children were examined as end line assessment by using the same questionnaire. The data were entered and analysed using Epi info software.

**Results** Overall, there was significant improvement in the status personal hygiene and reduction in related morbidities among school children. Noteworthy, percentage of current tobacco consuming children declined significantly from 506 (39.3%) to 210 (17.1%). The mean haemoglobin of the children increased from 10.7 g/dl to 11.4 g/dl. Notably, there was significant decline in thin (below 5th percentile) children from 67.5% to 60.3% and there is increase in normal children with BMI for age (5th-85th percentile) from 32.2% to 33.8%.

**Conclusions** The need based participatory Health Promoting School initiative for vulnerable Ashram school children could improve their health status.