

**Results**

An increase of 50 pg/ml in vitamin B12 was associated with a lower level of homocysteine. The methylenetetrahydrofolate reductase (MTHFR) enzyme. The common TT homozygosity of the C677T in the MTHFR gene is associated with reduced MTHFR activity. This study aims to assess the impact of serum levels of B12 and folate on plasma homocysteine considering C677T polymorphism in a Brazilian sample.

**Methods**

Serum vitamin B12, folate, and homocysteine of 259 participants from a population-based survey in São Paulo, Brazil, were used. The genotype for C677T was done with an allele-specific polymerase chain reaction. A generalised linear model with gamma distribution and link identity was applied to model homocysteine according to sex, age, vitamin B12 as well as folate (cut-off at tercile 7.1 ng/ml) and C677T polymorphism (non-TT and TT) interaction.

**Results**

Significant effects of males (p<0.01) and age (p<0.01) were found. An increase of 50 pg/ml in vitamin B12 was associated with a reduction of 0.11 ng/ml in homocysteine levels (p=0.01). Finally, an interaction between polymorphism and folate was found (p<0.01), controlling all the covariates. A mean difference of 5.7 ng/ml in homocysteine levels was observed between below and above tercile of folate controlling all the covariates. A mean difference of 0.11 ng/ml in homocysteine levels (p<0.01) was found. However, some individuals did not make follow-up visits to see a doctor even if they are deemed to be hyperglycaemic at a health check-up.

**Objectives**

To investigate proportions and characteristics of those deemed to be hyperglycaemic through screening but who did not make a follow-up visit.

**Design**

A retrospective cohort study.

**Setting and Participants**

The Japan Medical Data Center’s database includes data from health insurance claims and health checkups for 109,212 insured individuals.

**Main outcome measures**

Prevalence of follow-up visits after health checkups.

**Results**

We identified 4869 individuals deemed to be hyperglycaemic at health checkups (prevalence, 7.1%). Of these, 2432 (49.9%) did not make follow-up visits after health checkups (men=49.1%, women=64.6%). Elderly participants were more likely to follow-up after a health check-up where they were told to be hyperglycaemic (OR for NOT making follow-up clinical visit [95% CI]: 10 years older, 0.70 [0.65 to 0.75] for men, 0.77 [0.59 to 1.01] for women).

**Conclusions**

In the present study, almost half of individuals did not make follow-up after a health check-up where they were deemed to be hyperglycaemic. Older individuals were more likely to follow-up than younger individuals. Participant characteristics should be taken into account as improvements are made to health check-up services.

**PLASMA HOMOCYSTEINE LEVELS ACCORDING TO METHYLENETETRAHYDROFOLATE REDUCTASE GENOTYPE AND SERUM FOLATE LEVELS IN A POPULATION-BASED STUDY IN SÃO PAULO, BRAZIL**

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**The Characteristics of People Who Had Been Screened to Be Hyperglycaemic But Did Not Visit Clinics: A Retrospective Cohort Study**

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**LATENT MODEL FOR DNA METHYLATION, NUCLEOTIDE SYNTHESIS AND IMMUNE ACTIVATION FOR LUNG CANCER RISK**

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**IMPACT OF EXCESS WEIGHT ON THE RELATIONSHIP BETWEEN BLOOD PRESSURE AND CARDIOVASCULAR DISEASE: THE ASIA PACIFIC COHORT STUDIES COLLABORATION**

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