**Results** Among children of African American mothers, 87/329 (26.4%) ever had AD while 19/157 (12%) children of White mothers ever had AD. Overall, cord blood 25(OH)D levels were lower in children who ever had AD (geometric means=GM 30.6 vs 35.6 mmol/l, Wilcoxon Rank Sum=WRS p=0.02), but the difference was driven by White children (GM 39.7 vs 50.9 mmol/l, WRS p=0.036) and not African American children (GM 29.4 vs 29.6 mmol/l, WRS p=0.81). The association was also modified by season of birth. Lower 25(OH)D levels were found in children with AD born during summer (GM 35.8 vs 45.2, WRS p=0.02), fall (GM 28.1 vs 33.8, WRS p=0.036) and winter (GM 30.0 vs 35.7, WRS p=0.15), but not spring (GM 30.8 vs 31.4, WRS p=0.90).

**Conclusion** Cord blood vitamin D is associated with AD at 2 years of age in White but not African American children. The association is also influenced by season of birth.

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**P2-322** LOW PREVALENCE OF HYPERTENSION IN YEMENITE TYPE 2 DIABETIC PATIENTS

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**Introduction** Previous data suggest that the prevalence of hypertension (HTN) in Yemenite Jews is lower than in the general Israeli population. The aim of the present study was to compare the prevalence of HTN between type 2 diabetic patients of Yemenite (Y) and non-Yemenite (NY) origin.

**Methods** Cross-sectional study in a Diabetes Clinic. Clinical and lifestyle information was collected including a food frequency questionnaire.

**Results** Sixty three Y and 120 NY diabetic patients were included in the study. The age and sex distributions were similar in the two groups. Patients in the Y group had lower mean weight and waist circumference (72.3 kg vs 85.0 kg and 95 cm vs 105 cm, respectively, p<0.001) and their mean HbA1c level was higher (7.7% vs 7.2%, p=0.015). The prevalence of HTN was significantly lower in the Y compared to the NY group (63% vs 83%, p=0.003). Patients in the Y group consumed less antihypertensive medications than those in the NY group (1.6 vs 2.5, p=0.002), however blood pressure levels were similar in both groups. In a multivariate logistic regression analysis, NY origin was independently associated with a higher prevalence of HTN (OR 3.0, 95% CI 1.5 to 6.3, p=0.0025). There were no significant differences between the two groups in physical activity, total calories consumed and the DASH score.

**Conclusion** In this study the prevalence of hypertension in Yemenite was significantly lower compared to non-Yemenite diabetic patients. Since no differences were found in lifestyle characteristics it is likely that other mechanisms are involved.

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**P2-323** WITHDRAWN