

significantly had declined trends in study period ($p < 0.05$). Trends of age-specific incidence rates for both of pulmonary, extrapulmonary, also for male and female cases were increased as $\chi^2 = 1265$; $\chi^2 = 307.7$, $p = 0.0001$ and $\chi^2 = 931$; $\chi^2 = 582$, $p = 0.0001$, respectively. Considering the national tuberculosis standard index, smear positive notification rate was in the range of expected levels (58%–68%), but extrapulmonary incidence rates were more than the expected level.

Conclusion Regarding the higher incidence rates of tuberculosis in the southern regions of West Azerbaijan province of Iran, and despite of declined trends at some of districts at this region, it seems that more control and prevention activities are still needed, especially for the lower socioeconomic populations. Comparison of the demographic, socioeconomic status and specific incidence rates, revealed that the epidemiologic patterns of TB at this province have shifted from developing to developed countries status.

P2-435 SPECIFIC RISK FACTORS ASSOCIATED WITH CORONARY HEART DISEASE IN INDIANS

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Background The rapidly increasing burden of noncommunicable diseases is a key determinant of global public health. Coronary artery disease (CAD) is the largest killer globally.

Objective To study the distribution and the effect of specific risk factors on Coronary Heart Disease in the adult population.

Study design Cross sectional study.

Sample size 1101 subjects.

Study area Rural and urban area of Lucknow District, Uttar Pradesh, India.

Study tool and Data collection Pre-designed and pre-tested interview in relation to smoking, passive tobacco smoking, alcohol consumption, physical activity, Blood pressure, BMI, central obesity, dietary history, mental status, diabetes, lipid profile was assessed.

Results The prevalence of coronary heart disease in the total study sample came out to be 7.1 %. The prevalence in urban was significantly higher than rural 8.8% and 3.8% respectively, CHD was higher in past smokers (17.8%) than nonsmokers (7.1%), passive tobacco smoking (10.7%), hypertensive subjects 11.2% as compared to normotensive subjects 5.5%, significant difference was found between overweight (M-9%, F-20.9%) and normal subjects (M-6.7%, F-6.8%), higher prevalence was observed among subjects having central obesity (M-8.6%, F-6.4%), Non vegetarian had higher CHD (9.9%) as compare to vegetarian (6.0%). CHD was more in subjects having mild depression (12.1%) than normal subjects (6.5%). The prevalence was higher in subjects having high total cholesterol (7.6%) and low HDL level (9.5%).

Conclusion CHD was higher in smokers, non vegetarian, hypertensive and depressive subjects. There was significant difference between Rural and Urban smokers. Passive tobacco smoking, Alcohol consumption, B.P, BMI, central obesity and overweight was significantly associated with CHD.

P2-436 RURAL-URBAN MIGRATION IN RELATION TO DXA MEASURES OF ADIPOSITY IN INDIA

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Introduction India is experiencing an epidemic of obesity, diabetes and coronary disease. This epidemic is largely attributed to rapid urbanisation, driven in part by rural-urban migration. The aim of this study is

to investigate whether rural-urban migration is related to DXA measures of adiposity within the Hyderabad arm of the Indian Migrant Study.

Methods Migrants of rural origin, their rural dwelling sibs, and those of urban origin together with their urban dwelling sibs were invited to attend for a screening examination. Participants underwent DXA scanning to assess total body fat and abdominal fat. Anthropometric variables were also measured and participants were interviewed.

Results We recruited 253 rural non-migrant rural (RNM), 332 rural-urban migrants (RUM), and 125 urban non-migrant (UNM) participants. Overall, 54% were male and average age was 48 years. RNM had significantly lower total fat, in terms of kgs of fat and percentage body fat, compared to RUM and UNM among both men (RNM: 14.8 kg and 22.5%; RUM: 18.0 kg and 25.5%; UNM: 18.6 kg and 25.9%) and women (RNM: 20.9 kg and 35.3%; RUM: 24.7 kg and 38.3%; UNM: 27.3 kg and 39.8%). Abdominal fat mass was also significantly lower among RNM than the two urban groups in both men and women. The percentage of total body fat in the abdominal region was lower among RNM men than the two urban groups, but this difference was not apparent among women.

Conclusion Migration into urban areas is associated with increased obesity, which may drive other risk factor changes.

P2-437 DISABILITY IN TRAFFIC ACCIDENTS' VICTIMS ADMITTED TO A TRAUMA HOSPITAL IN BELO HORIZONTE, BRAZIL

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Introduction Traffic accidents are an important cause of morbidity and mortality around the world. The aim of this study is describe the characteristics, accident profile and injuries suffered by the victims and the occurrence of sequelae.

Methods The study included traffic accident victims admitted to Joao XXIII Hospital - FHEMIG up to 24 h after the event between 1 March and 15 July 2008. Patients were also interviewed 12 months after the accident. The study was funded by PPSUS/FAPEMIG.

Results 181 patients were interviewed 1 year after the accident. 85.6% were male. The age group with the highest number of accidents was the 20–30 year-olds (47% of the total). Motorcycle occupants were the most common type of victim—112 (61.9%). 89.7% of the patients were not able to work following the accident. Moreover, 40% were still unable to return to their usual activities 12 months after the accident. 50% considered their health as good, compared to their health condition one year before and 36.4% considered their health as worse than the previous year. Around 73% of the victims presented some kind of sequela one year after the accident, although they were mostly minor.

Conclusions This study showed a predominance of young male motorcycle occupants among traffic accident victims admitted to the hospital. Furthermore, a high proportion of victims were unable to return to work (40%), even one after the accident. This fact highlights the high burden brought on by traffic accidents.

P2-438 ETHNIC AND AGE DIFFERENCES IN THE INCIDENCE OF TUBERCULOSIS IN BULGARIA

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One-third of the world's population is infected with TB. TB is debilitating and contagious. Every year, more than 9 million people develop active TB and 1.7 million people die from the disease. In Bulgaria incidence was 25.1/100 000 in 1990. Due to various reasons,