

**SP1-106 PREVALENCE OF OVERWEIGHT AND OBESITY AMONG NUTRITION FRESHMEN IN MEXICO: ACADEMIC YEAR COHORT STUDY**

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WHO predicts that ~2.3 billion adults will be overweight and more than 700 million will be obese by 2015. Overweight and obesity have become major public health concerns in Mexico, reaching epidemic proportions among adults, adolescents and children in recent years. According to data from the most recent National Nutrition and Health Examination Survey (NNHES, 2006), Mexican youth have experienced a 7.7% increase in the prevalence rates of overweight and obesity (overall prevalence rate of 26.3% for both, NNHES, 2006). This study examined trends in overweight and obesity prevalence based on body mass index of the nutrition freshmen attending Veracruzana University from 2007 to 2009. A cross-sectional study was conducted with 271 nutrition freshmen attending classes during academic years 2007, 2008 and 2009, which represented 86% of overall sampling frame. BMI was grouped into 4 categories with the corresponding adolescent percentiles as recommended by the Centers for Disease Control and American Academy of Paediatrics and used to determine age- and sex-specific prevalence rates for overweight and obesity. Appropriate institutional ethics committee clearance and participants' informed consent were obtained. BMI-based nutritional classification showed an overall prevalence rate of 15.86% overweight and 3% obesity among freshmen for three academic years. The higher prevalence rates were 21% of overweight for 2007 and 4% of obesity for 2009. This study highlights the higher prevalence rate of overweight and lower prevalence rate of obesity among University youth and suggests an observed trend comparable to the NNHES.

**SP1-107 RISK AND PROTECTION FACTORS FOR CHRONIC NON-COMMUNICABLE DISEASES BY TELEPHONE SURVEY, BRAZIL, 2009**

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**Objective** To describe the risk and protection factors for non-communicable diseases with data from Surveillance System through telephone interviews (Vigitel) in 2009.

**Methodology** The prevalence of main risk and protection factors were estimated in adults (≥18 years old), by telephone interviews in a probabilistic samples of population covered by landline telephones in Brazilian state capitals and federal district, stratified by sex, age and level of education.

**Results** Data from 54367 adults were collected. Risk factors like smoking, overweight, soft drinks and fat meat consumption and alcohol abuse were more prevalent in men, young adults and people with lower education level. Men were more active in leisure time and consume more beans than women. Poor self-rated health and self reported diagnosis of hypertension and dyslipidemia, however, were more prevalent in women. Vigitel 2009 results reinforce the trend in decrease of smoking and increase in overweight in Brazil.

**Conclusion** Telephone surveys are useful to provide timely information with less cost, making it an important tool to assess risk and protection factors for chronic diseases and health promotion actions.

**SP1-108 PERIODONTAL DISEASE AND ACUTE MYOCARDIAL INFARCTION: COMMUNITY CONTROLS VS HOSPITAL CONTROLS**

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**Introduction** Comparatively diverse groups have been used to study the association between periodontal infection and cardiovascular disease. However there is no consensus regarding the most appropriate control group to be used for this purpose.

**Objective** To compare the use of hospital controls vs community controls for the association between periodontal disease (PD) and acute myocardial infarction (AMI).

**Method** We outlined two case-control studies with 621 subjects. In the first, the Case Group was compared with 207 individuals in the Hospital Control Group (HC), and in the second with 207 individuals in the Community Control Group (CC). The Case Group was with diagnosis of first AMI event. Controls Groups were individuals with no history of previous AMI, matched by sex and age. The HC was selected from the same hospital as the Case Group, while the CC comprised of neighbours of the Case Group. The participants underwent a complete periodontal examination, were evaluated for lipids and glucose levels, anthropometric status, and responded to an interview. The ORs obtained were adjusted for confounder covariables and controlled by the co-effect modifying variables with a significance level of 5%.

**Results** Among patients with PD the chance for AMI was higher among those without PD, CC (OR unadjusted=1.57 95% CI [0.98 to 2.52]) and for HC (OR unadjusted=1.73; 95% CI [1.11 to 2.72]). After adjusting for age, sex, smoking, education level, occupation, glycaemic index and HDL cholesterol increased the chance for both groups with statistical significance: CC (OR adjusted=1.89; 95% CI [1.11 to 3.28]) and HC (OR adjusted=1.92; 95% CI [1.14 to 3.23]).

**Conclusions** The findings indicate that the PD is associated with AMI, independently of the control group.

**SP1-109 TRENDS IN PROSTATE CANCER INCIDENCE IN SETIF, ALGERIA BETWEEN 1987 AND 2007**

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**Introduction** Prostate cancer is very common and while the incident rate is rising quickly, in many countries the mortality rate has started to fall. Urological cancers comprise approximately one third of all cancers diagnosed in men worldwide, and prostate cancer is the commonest of these. The global burden of prostate cancer rose from 200 000 new cases each year in 1975 to reach an estimated 700 000 new cases in 2002. In Algeria, in 2002 prostate cancer was the eleventh most common cancer in men. Our study aimed for adjusting prostate cancer incidence trends over the longest period available 1987–2007 in Setif for the effect of age, sex, and period of diagnosis and the geographical distribution.

**Material and Method** Incidence data were collected in the period 1987–2007 from the population-based cancer registry of Setif, the software used is the Can Reg 4.

**Results** In Setif, Prostate cancer ranked second among male population. Incidence was highest among men 80–82 age group