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CHANGES IN QUALITY OF LIFE INTO ADULTHOOD AFTER VERY PRETERM BIRTH AND/OR VERY LOW BIRTH WEIGHT IN THE NETHERLANDS

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Background and Aims When evaluating the impact of Very Preterm Birth (VPB) and/or Very Low Birth Weight (VLBW), it is important to explore Health-Related Quality of Life (HRQoL). Our aim is to study HRQol transition into adulthood.

Methods The Dutch Project on Preterm and Small for gestational age infants (POPS) cohort of 1338 VPB (gestational age < 32 weeks) or VLBW (< 1500 grams) infants in 1983, was contacted to complete online questionnaires at 28 years. In total, 314 of 928 eligible participants (33.8%) completed the Health Utilities Index (HUI) and the London Handicap Scale (LHS), which were also collected at 19yrs. We applied multiple imputation (MI) to correct for missing data and non-response for overall scores. We performed regression analyses and considered P-values < 0.05 (two-sided) as statistically significant. Results Both the mean HRQoL score measured with the HUI (MAU-score at 19yrs=0.89 (MI:0.83) versus 0.88 (MI:0.85) at 28yrs) and LHS (overall score 19yrs=96.5 (MI:93.9) versus 95.9 (MI:94.6) at 28yrs) did not change significantly. Individual HUI scores, when divided into four levels of disability (MAU-score(x) x=1, 1>x>0.9, 0.9>x>0.7 or x<0.7) improved in 28%, was stable in 48% and worsened within 24% of respondents.

Conclusions Overall, HRQoL of these Dutch adults born very preterm or VLBW was similar to HRQoL at 19yrs, using two HRQoL measures. This suggests that HRQoL remains stable from 19yrs onwards. Although no changes were found on group level, fluctuations in HRQoL between ages did occur within a large proportion of individuals.

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SUICIDE AND SUICIDE ATTEMPTS IN MALI

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Background and Aims Suicide is a major hidden public health problem, causing almost half of all violent deaths and resulting in almost one million fatalities every year, as well as economic costs in the billions of dollars, says the World Health Organization (WHO). The aim of this study is to describe the main characteristics of suicidal poisoning in Mali.

Methods A descriptive retrospective analysis of voluntary poisoning cases, recorded between 2000 and 2010 in Malian hospitals, was performed.

Results During the period of study, a total of 547 suicidal poisoning cases including 65 cases of successful suicide have been identified, constituting 62.6% of voluntary poisoning notified during this period. Most victims are teenagers and young adults aged 15–24 years (62.2%). For this age bracket, the number of suicide attempts is 7.7 times higher than that for successful suicide. According to data recorded, women make 2.4 times more suicide attempts than men. The medication intake is the primary means employed by victims (71.3%), followed by industrial products (15.3%). The poisoning symptoms are varied, depending on involved toxins, the ingested quantity and the delay before treatment.

Conclusions During their hospitalization, suicide attempters should receive careful medical and psychiatric supervision to avoid the risk of recurrence.

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ADDLESCENTS WITH LIFE-LIMITING ILLNESSES - ARE WE TAKING A SEXUAL HISTORY?

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Introduction Talking to adolescents about sex can be difficult for health professionals - they may not know how to begin the conversation, may feel embarrassed or ill-prepared, may feel they do not have enough time or it is not relevant to their consultation. Many adolescents are having sex and adolescents with life-limiting illnesses are no exception. Giving them the opportunity to talk about sex during consultations is therefore important.

Aim A literature review revealed no previous studies on this topic. Our aim was to review medical consultations of adolescents with life-limiting illnesses and establish whether sex was discussed.

Method A retrospective review of clinical notes of adolescent patients with life-limiting illnesses was carried out with a view to establishing whether a sexual history was taken on any occasion.

Results None of the healthcare professionals took a sexual history from any of the adolescents on any occasion despite multiple clinic attendances.

Discussion Doctors tend to focus on the 'clinical' aspects of sexual health such as prescribing contraception and testing for sexually transmitted diseases, omitting sexual concerns and sexuality. Clinicians may struggle to accept that adolescents with life-limiting illnesses may want to talk about sex and this study has highlighted that it is a topic which is generally ignored. It is the responsibility of clinical departments to train their staff in sexual history taking, an important aspect of healthcare.

Conclusion Health professionals should include sexual health in routine palliative assessments so that every adolescent is given an opportunity to be heard.

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RELATION BETWEEN SCREEN TIME AND METABOLIC SYNDROME AMONG EMIRATI ADOLESCENTS

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Background United Arab Emirates (UAE) has one of the highest rates of type to diabetes mellitus in the world. This aimed to determine relationship between screen time and metabolic syndrome (MetS) in adolescents.

Methods The study sample included 1012 adolescents (12–180 years) from a random sample of 8 schools out of 114 schools in Al Ain district of Abu Dhabi Emirates in UAE. Average daily screen time (combined computer, television, and video game use) self-reported. Anthropometric (weight, height, waist circumference), blood pressure measurement, blood draw after overnight fasting (for fasting blood sugar and plasma lipids) were completed by trained nurses. International Diabetes Federation criteria were used to define MetS. Overweight and obesity status were defined using the International Obesity Task Force definition.

Results A high proportion (53%) of study participants spent ≥ 2 hours on screen. The prevalence of MetS was 22% in boys and 4% in girls. Boys with MetS were more likely to spent ≥ 2 hours on screen (adjusted odds ratio 1.65, 95%CI, 1.01–2.69) compared to their counterparts who spent <2 hours, after adjustment for relevant covariates. We did not find a significant (p<0.05) relationship between screen time and MetS in girls.

Conclusion Screen time was associated with MetS in adolescents boys. Prevention initiatives for youth should include programs aimed at reducing screen time.

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OUTCOME OF REPRODUCTIVE HEALTH EDUCATIONAL INTERVENTION ON DROP-OUT RATE DUE TO PREGNANCY AMONG RURAL HIGH SCHOOL STUDENTS IN SW NIGERIA

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Background and Aims In Nigeria, many in-school adolescents engage in risky sexual behaviour, which predisposes them to social and health consequences, including unwanted pregnancy, school drop-out, STIs and HIV/AIDS. This study addressed drop-out rate due to pregnancy among female high school students in rural SW Nigeria.

Methods The study utilized quasi-experimental design which consisted of four experimental schools in one rural local Government Area (LGA) and four control schools in another rural LGA which were randomly selected from the 30 existing LGAs in Osun State (One of the six states in SW Nigeria). The experimental schools received the intervention strategies (reproductive health educational messages including contraceptive services) while the control ones did not.

The intervention strategies were implemented for two and half school calendar terms (a calendar term in Nigeria lasts approximately thirteen weeks), from November 2008 to June, 2009. Dropout rate due to pregnancy were collected in both groups at pre- and post- intervention using school attendance records and home visits. **Results** The results showed a sharp reduction in the average proportion of students who dropped out due to pregnancy in all the intervention schools compared with the control group which recorded a slight change. The change was from 57.3% to 26.2% in the intervention group, while the control was from 64.5% to 55.0%. **Conclusions** The study showed that the intervention strategies had an impact on reduction of school drop-out rate due to pregnancy.

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LINGUISTIC ACCULTURATION AND PARENTAL MONITORING ON THE SUBSTANCE USE OF MEXICANHERITAGE ADOLESCENTS IN PREDOMINANTLY MEXICAN ENCLAVES OF THE SOUTHWEST US

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The present study, from an ecological perspective, examines the relationship of linguistic acculturation and perceived parental monitoring of the adolescent's behaviors as predictors of youth substance use

Methods The data are drawn from a longitudinal study of the effectiveness of a Parent Education supplement called "Families: Preparing the New Generation." This supplement was designed to increase the efficacy of the established *keepin'* it *REAL primary prevention intervention in reducing substance use among adolescents. Data were drawn from the pre-intervention Wave 1 assessment of 388 youths (189 boys, 204 girls) 7th grade participants who were* recruited from nine middle schools, and youths who reside within two school districts that are densely populated with Mexican heritage youths.

Results: In general, greater perceived parental monitoring did significantly predict a lower likelihood (frequency) of substance use both for boys and girls. Furthermore, among boys, there was a significant acculturation by parental monitoring interaction effect which predicted lifetime use of alcohol. Among boys relative to girls, the effects of parental monitoring were more pronounced in terms of lower levels of alcohol use, among the most highly

acculturated boys. Results are discussed in terms of how levels of acculturation impact family processes and the drug use behaviors of Mexican-heritage adolescents who live primarily within Mexican enclaves (barrios) and who attend schools that have a high proportion of Mexican heritage youths. The present findings are also discussed in terms of the interface of community-based prevention with pediatrics as a means to enhance the overall adolescent health outcomes.

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IMPACT OF OBESITY ON BONE MINERAL CONTENT AND DENSITY IN A GROUP OF EGYPTIAN ADOLESCENT GIRLS

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Recent studies suggest conflicting findings regarding association between obesity and adolescent bone mineral content (BMC) and bone mineral density (BMD).

Aim To determine the impact of being obese on whole-body (WB) BMC and BMD in a group of Egyptian adolescent girls.

Methods Study included 35 obese adolescent girls (13.5 \pm 1.8 years) with body mass index (BMI) \geq 95th percentile and 35 maturation-matched (14.4 \pm 1.7 years) controls with BMI 15th - 85th percentile for age and gender. Bone mineral areas (BMA), BMC, BMD at the WB and body composition (lean mass, fat mass and fat %) were assessed by dual-energy X-ray absorpiometry (DXA). Calculations of the BMC/height ratio and bone mineral apparent density (BMAD) were computed for the WB.

Results BMD, BMC, BMAD and BMC/height ratio were highly significant higher in obese adolescent girls compared to controls. Body weight, height, BMI, lean mass, fat mass and fat% had highly significant positive correlations with BMD, BMC, BMAD and BMC/height ratio. BMA had highly significant positive correlations only with weight, height, lean and fat mass. After adjusting for either body weight or total fat mass, BMD, BMC, BMAD, BMC/height and even BMA became highly significant higher in control than obese girls. After adjusting for total lean mass, the same was observed but the differences were only highly significant between the two groups in BMC and BMA.

Conclusion This study suggests that there is positive effect of obesity on BMC, BMD, BMAD and BMC/height ratio due to body weight, while obesity has no effect on BMA.

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RESILIENCE AS A WAY TO COPE WITH BULLYING IN BRAZILIAN VULNERABLE STUDENTS

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Bullying is an intentional aggressive behavior, involving imbalance of power. Bullied children are at risk for chronic multiple risks, social, emotional, and behavioral problems. Resilience is a positive predisposition towards difficulties, despite adverse experiences. It strengths self esteem and empowers students to face adversities.

The main goal of this research was creating safer learning environment for students. Specific objectives were detecting bullying incidence in Brazilian schools, teachers' reaction to the aggressions and implement anti bullying programs, based on encouraging resilience in children.

255 children and teenagers, from both sexes, from public and private schools (8–16 years old) and 10 teachers filled a Bullying and Resilience Questionnaire. Discussions between teachers and students started activities designed to promote participants' resiliency skills, reduce bullying behavior and create safer classroom environments.