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TIME TREND MORBIDITY DUE TO TRAFFIC ACCIDENTS IN THE CITY OF SÃO PAULO, BRAZIL

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Nearly 1.3 million people die every day in traffic accidents (TA) worldwide, and 20–50 million people are injured. In 2010, the Brazilian public hospitals registered over 146 thousand admissions due to TA. São Paulo is the most populous city in the country, with nearly 11.8 million inhabitants and a fleet of more than 7.5 million vehicles. This study aims to describe the profile of hospital admissions due to TA in São Paulo and its time trend over the period 2000-2014. Hospital admissions data on TA was obtained from the Health State Secretary. Each victim was classified in one of the four groups according to the type of transport, based on ICD 10th revision: all, pedestrian, motorcyclist, vehicle occupant. Age groups were defined as 0-14, 15-19, 20-39, 40-59, 60 years and over. Statistical analysis was performed using Negative Binomial regression models.

Around 80% of admissions were of males. Running over pedestrians were responsible for the higher morbidity rates among man until 2003. Since 2004, motorcycle accidents are the main cause; rates (number of admissions per 100.000 inhabitants) have greatly increased during the period (from 14,8 to 42,5 $p < 0,05$). Age groups most susceptible to this type of accident were 15-19 and 20-39 years. Those aged 0-14, 40-59 and 60 years and over were admitted mainly as victim of trampling; the rates showed little fluctuation over the period (from 24,8 to 22,3 $p > 0,05$). The rates for vehicle occupants did not change much during the period (from 7,6 to 7,4, $p > 0,05$).

THE COCCINELLE STUDY-INTERVENTIONAL CARDIOLOGY DURING CHILDHOOD AND CANCER RISK

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Interventional cardiology (IC) has become an essential tool in the diagnosis and treatment of children with a wide variety of congenital and acquired forms of cardiovascular disease. Despite the clear clinical benefit to the patient, radiation exposure from IC may be substantial. Given children's greater sensitivity to radiation and the longer life span during which radiation health effects can develop, an epidemiological cohort study, named Coccinelle (French acronym for "Ladybird"), is carried out in France to evaluate the risks of leukaemia and solid cancers in this population. The study population consists of paediatric patients who underwent at least one IC (either for diagnostic or therapeutic purposes) before the age of 16 years and from 1 January, 2000, through 31 December, 2015. Patients are recruited in paediatric cardiology departments that perform IC. Individual IC-related doses are being assessed for each child included in the cohort. For each IC performed, dosimetric parameters (dose area product, fluoroscopy time) are retrieved retrospectively. The cohort will be followed up through linkage with French paediatric cancer registries. Our cohort study is specifically designed to provide further knowledge on the potential cancer risk associated with paediatric IC. This research project will also increase our knowledge on the level of doses received by the children during IC and will provide additional radiation protection information.