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**P1077****Tobacco smoke: Environmental control in a public hospital of Rome**Rosastella Principe<sup>1</sup>, Gregorino Paone<sup>2</sup>, Patrizio Palermo<sup>2</sup>, Salvatore Damante<sup>3</sup>, Sergio Fuselli<sup>4</sup>, Giuseppe Alessio Messano<sup>5</sup>, Piergiorgio Zuccaro<sup>6</sup>.<sup>1</sup>Smoking Cessation Center, S. Camillo-Forlanini Hospital, Rome, Italy; <sup>2</sup>Heart and Lung Institute, Sapienza University of Rome, S. Camillo-Forlanini Hospital, Rome, Italy; <sup>3</sup>Environmental Researcher for Air Quality, Health Institute, Rome, Italy; <sup>4</sup>Hygienic Living Environment, Health Institute, Rome, Italy; <sup>5</sup>Department of Public Health and Infectious Diseases, Sapienza University of Rome, Rome, Italy; <sup>6</sup>Observatory Smoking, Alcohol and Drugs, Health Institute, Roma, Italy

**Background.** The Environmental Tobacco Smoke (ETS) is a complex mixture of around 4000 chemicals, some 50 which are carcinogens. Particulate Matters (especially PM<sub>2,5</sub>) are the most commonly used indicators to evaluate environmental exposure to ETS. Passive smoking has been associated with many adverse health effects. On 10 January 2005 in Italy a smoking ban was enforced for all indoor public places.

**Aims and objectives.** Our Study was aimed to monitor the compliance with the smoke free policy within a Public Hospital in Rome.

**Methods.** A cross sectional study was designed to measure 4 month levels of Particulate Matter (PM<sub>2,5</sub> and PM<sub>10</sub>) in three sensitive areas of a Public Hospital: Administrative Offices, Surgical Units and Main Entrances. To accomplish this, we used passive environmental mass analyzer by Radiello and personal samplers EGO plus TT Zambelli and GT 531 Met One Instruments.

**Results.** While no significant concentrations of PM<sub>2,5</sub> and PM<sub>10</sub> were measured in the Administrative Areas and in the Surgical Units (except a peak of 38 µg/m<sup>3</sup> PM<sub>2,5</sub>), a significant increase of PMs levels was observed at Hospital Main Entrance (PM<sub>2,5</sub> for 24h > 18 µg/m<sup>3</sup>), which was above the 10 µg/m<sup>3</sup> that WHO has set for Good Air Quality

**Conclusion.** Hospitals should be among the most influential settings in terms of controlling tobacco consumption promoting smoke-free environments and monitoring compliance with the law. Our study confirms the compliance with the ban in most of the analyzed areas, however, the Main Entrances were not completely free from second-hand smoke. This data should prompt a revision of current smoke free policies particularly in the outdoor settings.

**P1078****The airways response to inhaled corticosteroid therapy in children with asthma exposed to environmental tobacco smoke**Snezana Radic<sup>1</sup>, Zorica Zivkovic<sup>1</sup>, Branislav Gvozdenovic<sup>2</sup>, Sofija Cerovic<sup>1</sup>, Olivera Calovic<sup>1</sup>, Tamara Krivokapic<sup>1</sup>, Milka Micic-Stanojevic<sup>1</sup>, Olivera Vlahovic<sup>1</sup>, Vera Aleksic<sup>1</sup>.<sup>1</sup>Children's Hospital for Respiratory Diseases, Clinical Hospital Centre "Dr Dragisa Misovic Dedinje", Belgrade, Serbia; <sup>2</sup>Clinical Management, PPD Serbia, Belgrade, Serbia

**Background:** Corticosteroids are the most effective anti-inflammatory therapy for asthma. A reduction in histone deacetylase (HDAC) activity is suggested to prevent the anti-inflammatory action of inhaled corticosteroids (IC). Cigarette smoke is known to reduce HDAC expression.

**Aim:** To compare the lung function test parameters and the response to the IC in the asthmatic children exposed and not exposed to environmental tobacco smoke (ETS).

**Methodology:** 527 children (6-16 years) with moderate to severe asthma performed spirometry before and after the 6 months of IC. According to questionnaire, we divided children into two groups: ETS exposed (ETSE, N 337) and ETS free (ETSF, N 190).

**Results:** There were 49.9% of boys and 50.1% of girls (mean age 10.83). Average dose of Fluticasone dipropionate (FP) was 225.11±119.98 mcg per day per child. Among ETSE children, 208 were with one, 129 with both smoking parents, 228 had smoking mother and 238 had smoking father. ETSE children received statistically higher dose of FP, and dose of FP increased with increasing of number of smokers in the family (F=45.412, p<0.001). ETSE children had lower lung function parameters before and after the IC, and the influence of mother and both smoking parents on lung function was more pronounced than fathers alone. After the 6 months of IC, both groups of children significantly improved lung function tests, no difference between groups.

**Conclusion:** ETS impaired the lung function growing rate in exposed children with asthma, but did not decrease response to inhaled corticosteroids. It is necessary to educate smoking parents to protect asthmatic children from tobacco smoke negative influence.

**P1079****Tobacco use and secondhand smoke exposure levels among Muslim community in Ireland**Zubair Kabir<sup>1</sup>, Sheila Keogan<sup>2</sup>, Vanessa Clarke<sup>2</sup>, Luke Clancy<sup>2</sup>.<sup>1</sup>Epidemiology & Public Health, University College Cork (UCC), Cork, Ireland; <sup>2</sup>Research, TobaccoFree Research Institute Ireland, Dublin, Ireland**Background and objectives**

Smoking among ethnic minorities and immigrants continues to be a tobacco control policy issue in many industrialized nations. Ireland experienced recent immigration. We characterized tobacco use and secondhand smoke (SHS) levels among the Muslim community in Ireland considering the recent heterogeneous nature of the Irish population.

**Methods**

A validated questionnaire, with additional questions tailored to the Muslim community, was administered between July 2011 and January 2012, online (survey-monkey link, in English) and a self-administered print questionnaire survey (in Bengali, English and Arabic). The survey was distributed through a Muslim magazine and emailed to well-known Irish Muslim organizations. 270 online and 130 print questionnaire responses (field interviewer-administered) totalling 400 respondents were collected.

Both descriptive and chi-square tests of proportions were performed using SPSS (v 18.0).

**Results**

Age-adjusted current tobacco users was 21.9% (28% men and 10% women); 4.3% consumed smokeless products. 27% in 26-45 years of age were current tobacco users; surprisingly 25% in higher educated individuals used tobacco compared to 18% with lower levels of education. 25.3% are former tobacco users. 14.3% of the recent migrants (<5 years) currently used tobacco compared to 28.3% who lived longer in Ireland. 23% allowed smoking inside homes (27% in lower social class vs. 13% in upper social class); 29% were exposed to SHS in cars.

**Conclusion**

Muslim men in Ireland from many different nations have smoking rates similar to Irish men, Muslim women smoke less than Irish women. SHS exposure was high.

**P1080****Aspects of smoking in teachers-past and present**

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Teachers were and remain models for students, regardless of age. Therefore tobacco among them has a negative influence on children. Aim of this study was to determine the trend in smoking prevalence teachers.

**Material and method:** we used anonymous questionnaires to teachers of Urziceni (group A) and Bucharest (group B), repeated at an interval of ten years (2001 and 2011).

**Results:** Teachers smoking prevalence was 45.4% in 2001 (47.9% in group A; 43.3% in group B) and 23.5% in 2011 (21.7% group A; 24.7% group B). Prevalence by gender was similar for group B (42.6% M/43.9% F) and higher for males in group A (60.6% M; 39.2% F) in 2001. In 2011 the prevalence M/F was: 39.3%/19.0% for A and 28.8%/23.2% for B. In 2001 almost 90% of smoking teachers consumed tobacco inside school, while in 2011 only 4% of teachers smoking in school. Nicotine dependence was high at 44.8% of subjects in 2001 (45.7% A; 43.9% B). In 2011 38.6% of them were highly dependent. The level of knowledge about the harmful effects of smoking on health was definitely better in 2011 than 2001. It should be noted that 10.4% of teachers were ex-smokers in 2001 respectively 18.9% in 2011.

**Conclusions:** Considerable decrease of tobacco consumption in teachers over the past decade can be correlated with a better health education-information campaigns conducted in schools in recent years.

Also amending legislation on tobacco was efficient-banning smoking in schools, ban on tobacco media advertising.

Initiation of national anti-tobacco program, including free counseling and treatment for smokers also helped a number of teacher to quit smoking.

Future action is needed for a greater reduction of smoking in general population and default among educators, main models for our children.