higher values. *Discusion*: Pollution may have an impact even in uterus. Biomarkers of specific pollutants, when available, will allow us to further investigate this effect. Supported by: FIS-PI040777

430 TIME TRENDS IN SUICIDE MORTALITY BY METHOD IN GERMANY FROM 1991 TO 2002

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ABSTRACT

Background: Suicides are the main fatal outcome of psychological diseases. Favourable time trends with decreasing suicide mortality were observed in men and women in most Western countries in the last decades. Objective: To assess time trends in suicide mortality by method. Design and Methods: From 1991 to 2002, a number of 146,709 suicides of subjects aged = 15 years were recorded by the Federal Statistical Office of Germany. Based on these data, seven different suicide methods were defined. Poisson regression was used to estimate the age-adjusted annual percentage change (AAPC) of the number of each suicide method. Results: The suicide methods most frequently used in both sexes were hanging, strangling or suffociation (HSS) with 55.8% (in men) and 39.9% (in women), followed by self poisoning. Significant declines of the number of suicides were observed, in descending order, for self poisoning, drowning and HSS in both sexes (AAPC between -6.2 and -1.1). In contrast, methods using firearm discharges or stab with sharp object remained in roughly constant level during the observation period in both sexes. Conclusion: Time trends in suicide mortality were substantially dependent from the choice of method. Discussion: Further examinations are recommended concerning possible reasons for different suicidal methods.

431 INCREASING RATES OF OVERALL AND LAPARO-SCOPIC CHOLECYSTECTOMY IN FRIULI VENEZIA GIU-LIA, NORTH EAST ITALY 1993–2004

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ABSTRACT

In recent years minimally invasive surgery procedures underwent rapid diffusion and laparoscopic cholecystectomy has been among the first to be introduced. After its advent, increasing rates of overall and laparoscopic cholecystectomy have been observed in many countries. We evaluated the effect of the introduction of laparoscopic procedure on the rates of cholecystectomy in Friuli Venezia Giulia Region, performing a retrospective study. From regional hospitals discharge data we selected all records with procedure code of laparoscopic (ICD 9 CM: 5123) or open (5122) cholecystectomy and diagnosis of uncomplicated cholelithiasis (ICD 9 CM: 574.0; 574.1; 574,2) or cholecystitis (575,0; 575,1), in any field, from 1993 to 2004. In the 12 year study period, the number of overall cholecystectomies increased from 1546 to 2039 (+31,9%), mainly for the relevant increase of laparoscopic interventions from 3 procedures, (0,2% of overall cholecystectomies), to 1697 (83,2%). Rates of laparoscopic cholecystectomies increased from 0,1 to 46,8 per 100 admitted patients with diagnosis of cholelithiasis or cholecystitis. The introduction of laparoscopic cholecystectomies was followed not only by a shift towards laparoscopically performed interventions but also by an increase in overall cholecystectomies in Friuli Venezia Giulia Region.

432 LATERALISATION AND CANCER; REFLECTIONS ON INTRA-INDIVIDUAL DEVELOPMENTAL DIFFERENCES ON CANCER RISK

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ABSTRACT

Background: Higher left sided breast cancer incidence and relations of handedness with (breast)cancer risk may reflect a neuro-developmental hypothesis that would predict opposite Left/right ratios for brain versus other tumors. Design: Exploration of Left/Right rations and their 95% C.I. of tumors in paired 'genetically identical twin' organs registred between 1989–2003 in the National Netherlands Cancer Registry. Results: Male breast cancer L/R ratio 1,20 (1,05 –1,37) Female 1,08 (1,06–1,09). Ovaries 0,97 (0,93–1,01), Testis 0,90 (0,86–0,95), Adrenals 1,17 (0,99–1,38) Brain 0,98 (0,94–1,03), Kidney 1,00 (0,97–1,03). Discussion:

- Although above hypothesis is refuted the preponderance of lateralisation in endocrine tumors fits other (neuro)endocrine developmental trajectories.
- The INTRA-male breast cancer L/R effect size challenges the importance of 'classical' reproductive factors which combined explain about the same INTER-individual variance in female breast cancers.
- 3. Parralels with L/R differences in (endocrine)organ size and/or body size fit other developmental hypothesis proposed previously by deWaard and Albanes on the role of available vulnerable target tissue and cancer risks. Conclusion: INTRA-individual developmental oriented epidemiology may be essentially different from 'classical' INTER-individual risk factor epidemiology.

433 WEB-BASED BIRTH COHORTS

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ABSTRACT

Background:. Several birth cohorts have been recently established. They permit investigating diseases using a life-course approach, but should be necessarily large and a need for collaborative studies has been claimed. Objective: To understand whether it is feasible to recruit a birth cohort using the Internet. Methods: We constructed the study website (http://www.progettoninfea.it), with information on the study aims and link with the questionnaires, to recruit pregnant women attending each of five hospitals in Turin (Italy, 900 000 inhabitants) during their pregnancy. The study is being advertised at the hospitals using leaflets and posters. Participant women accessed the website and answered the first questionnaire (450 items, 14 sections). They accepted to be contacted after delivery to answer the follow-up questionnaires. Results: 12.2 women per week were recruited between September and December 2005, implying 660 expected yearly participants. All 14 sections were completed by 87% of the participants, of whom 57% had a degree certificate. Women indicated that they would accept to mail their (81%) or their son's (70%) buccal swabs. Conclusion: The Internet is an efficient method to recruit birth cohorts. This method can be used to cover large populations, in which a traditional birth cohort is not feasible.