

overall model fit and fit of internal structural model are well. The findings indicate that relative advantage, complexity, compatibility are dominant factors in explaining the attitude of substance abuse; the primary and secondary referent groups are dominant factors in explaining the subjective norm of substance abuse; and self-efficacy and convenience are dominant factors in explaining the perceived behavioral control. The results also indicate that the attitude, subjective norm and perceived behavioral control are dominant factors in explaining behavior tendency of adolescent's substance abuse. This study draws upon the theory of planned behavior as the theoretical basis and empirical findings for a pragmatic explanation of key factors affecting substance abuse in early adolescence.

FP-101

Depression and Diabetes: The Complicated Co-Morbidity

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Background: Among the non-communicable conditions afflicting the population, depression requires special attention due to high prevalence and co-occurrence with diabetes. It has high negative impact on health-related-outcomes and quality-of-life of diabetics. It has been considered as modifiable risk factor for diabetes control and management, and is amenable to cost effective treatment. Objective of the study was to identify the factors associated with depression among type 2 diabetics.

Methodology: This is a hospital based case control study with 300 subjects in 1:2 ratio. All consecutive patients attending the hospital were screened with nine-item patient health questionnaire to assess depression and a pretested structured interview schedule was administered to assess socio-economic, behavioral and diabetes specific factors. Bivariate and multiple logistic regression analyses were done using SPSS software.

Results: Risk factors identified in bivariate analysis were female sex, living alone, less than high school education, smokeless tobacco use, physical inactivity, poor social support, poor dietary adherence and poor glycemic control. However, multiple regression analysis indicated poor glycemic control [OR=6.32;(3.08-12.98)], poor social support system [OR=7.11;(3.52-14.35)], poor dietary adherence [OR=6.08;(3.04-12.13)] and smokeless tobacco use [OR=2.01;(1.03-4.23)] are significant predictors of depression.

Conclusion: Depression was significantly associated with modifiable risk factors like socio-behavioral and clinical factors. Hence a holistic approach for identification and rectification of risk factors by those who care for diabetics is the need of the hour for healthy living.

FP-102

Cultural Dimensions of Depression in Bangladesh: A Qualitative Study in Two Villages of Matlab, Bangladesh

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This article reports the results from a qualitative study conducted in two villages of Matlab. Participants with history of depressive episode were selected from a previous survey. A case vignette was used to elicit local terms for depression, the perceived causes, impact and treatments. Hardly anyone recognized the term Bishonnota (literal translation of depression) used in past surveys. Most thought the vignette was about Chinta Rog (Worry Illness). Majority spoke of somatic symptoms. When explored further, they mentioned sadness and psychological complaints. Men felt it affected them more while women felt the opposite. Most associated Chinta Rog with poverty and social issues with impact on marriage, work, and education. They attributed the cause to thoughts and emotions resulting from social causes. Commonly suggested treatments were more income, better relationships, and tablets. Former health providers were often the first choice for help-seeking.

FP-104

Stress in a Workplace in Mongolia

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Aim: The aim of the our study is to determine of immune system changes workers on their jobs/hospital, legal and commercial organizations/.

Method's: Level of stress of healthy peoples determined by questionnaire of Spielberg, in peripheral blood serum cortisol interleukin – 6 and tumor necrosis factor defined by the method of ELISA using monoclonal antibody's. Statistical analyses done by SPSS 10.0 for windows programme.

Result of study: Determined 21% of studied people had no stress; and 78% had stress; 47.6% with I degree, 18.1% with second degree, 13.2% with third degree. The average age of the people was 26-30+0.4; 42.2%, of them – male and 57.8% - female. 70 people with the second and third level of stress and 20 men with the 0 level stress were chosen for the immune test. The cortisol level in blood serum of people with stress has increased ($p<0.0001$) than the people who had no stress. It shows that IL-6 ($p<0.01$), TNF α ($p<0.05$) in the peripheral blood serum of people with stress has increased than the people in the control group.

Conclusion: 1) It can be concluded that 78.9% of workers in hospital, legal and commercial organizations feel stress in their workplaces; 2) The content of cortisol in the peripheral blood serums have been increased during the stress; 3) Increase of IL-6, TNF α cytokine in

the peripheral blood serum can lead to change the function of the immune system of the body.

FP-105

Psychosocial Distress and Suicidal Risk Behavior among Chinese and Philippine Adolescents

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Objective: To determine the association of psychosocial distress and suicidal risk behavior among Chinese and Philippine adolescents.

Method: Global School-based Student Health Surveys conducted in China and the Philippines were used to identify the association of psychosocial distress indicators (sad/hopeless, loneliness, worry) and also health behaviors (substance use, physical fighting, being bullied, overweight, physical activity, sedentary activity) with suicidal risk behavior (contemplating attempting suicide or suicidal ideation, making a plan to attempt suicide). Subjects included 9,015 Chinese adolescents and 7,338 Philippine adolescents who participated in the GSHS. Logistic regression was used to determine these associations and identify specific psychosocial distress indicator and health behaviors correlates of adolescent suicidal behavior. Weighted percentages were calculated to determine the frequency of the suicidal risk behaviors. **Results:** Chinese girls were more likely to report suicidal risk behavior than Chinese boys, while among Filipinos, boys were more likely than girls to have made a plan to attempt suicide and there was no difference in suicidal ideation. The logistic regression results showed that the strongest correlate (predictor) of suicidal risk behavior in both the Chinese and Filipino adolescents was having sad/hopeless feelings almost every day for two weeks or more in a row that an adolescent stopped doing their usual activities during the past 12 months. Several other psychosocial indicators and health behaviors were found to be significant correlates with suicidal risk behavior. **Conclusion:** Public health professionals in China and the Philippines need to understand the risk factors associated with youth suicide contemplation.

FP-106

City Health Indicator: Awareness of the Suicide Death Rate in the Middle Age and the Aged Population within Wanhua District, Taipei

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The suicide death rate of the middle aged and the aged population is one of the 35 local health indices in Wanhua, Taipei. Indeed, suicide officially joined the top 10 causes of death in Taiwan in 1997. Suicide did not relinquish its position in the past decade, in which it ranked seventh and sixth respectively in Taipei and Wanhua in 2006. Clearly, suicide has gradually become a silent killer of the district residents. Surprisingly, the

suicide rate of the aged population (above the age of 44) in Wanhua was as high as 60% in 2004 to 2006 compared to other age groups. Furthermore, the suicide death rate of the middle age and aged population in Taipei from 2004 to 2006 was 26.53(per 100,000), 27.43(per 100,000), and 26.23(per 100,000), while that of Wanhua was 14.21(per 100,000), 28.06(per 100,000), and 17.36(per 100,000), respectively. As a result, greater intervention into the mental health of the aged population is essential and necessary in Wanhua. There are two valid preventive strategies that are commonly recognized for suicide, early detection and treatment of depression and the control of the suicide intent. Consequently, mental health seminars and treatment related to depression are the major directions needed for health professionals and government to pursue.

FP-107

Factors Associated with the Prescription of Methylphenidate for Newly Diagnosed Attention Deficit Hyperactivity Disorder (ADHD) in Taiwan

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Objectives: Methylphenidate is one of psychostimulants commonly used to treat Attention-Deficit Hyperactivity Disorder (ADHD). Concerning a gradual increase of incident ADHD and higher abuse liability of methylphenidate, the purpose of this study is to estimate the proportion of incident ADHD who received methylphenidate and associated predictors among young people in Taiwan.

Methods: On the basis of the National Health Insurance Research Database, we identified 10,153 incident ADHD cases (ICD-9: 314) with ages younger than 17 years in 2000. Chi-square test and Cox proportional-hazard regression were performed to compare the distribution and estimate the hazard ratio linking individual- and service provider-predictors for receiving Methylphenidate prescription, with stratified by prior history of mental disorders, defined by ICD-9 290-313 and 315-319.

Results: An estimated 17% of newly diagnosed ADHD had previously suffered from at least one mental disorders. Only 11% of non-comorbid incident ADHD received Methylphenidate prescription upon diagnoses, slightly lower than 15% in their comorbid counterparts. Individual-(e.g., age; aHR=3.1~7.0) and service provider- (e.g., level of medical institution; aHR=1.4~1.7) were significantly associated with methylphenidate prescription with the year of diagnosis. Adjusted hazard ratios of predictors in non-comorbid ADHD were generally greater than those in the comorbid peers. **Conclusions:** Our findings revealed individual- and service provider-characteristics both influence the receiving of methylphenidate soon after ADHD was diagnosed, and possible comorbidity-related differences appear in the strength of association. This empirical