

Japan presents a situation quite similar to Western Europe but with differences worth to study. Japan has banned asbestos in 2004, almost ten years after France (1996). Despite the limited total number of lawsuits (around 40), asbestos has become an important social issue widely debated that has generated a new law for compensation. More interestingly, a medium scale lawsuit has been engaged against the state. The 35 plaintiffs used to work in textile asbestos of very small scale in Sennan, the southern suburbs of Osaka, and birthplace of asbestos industry in Japan. As the companies have closed years ago, instead, they sued the state as they found out that the ministry of Health had conducted epidemiological surveys as soon as 1938. Although the results of this survey were very alarming, the public officers decided not to engage any preventive measure.

Conclusion: Through the case of asbestos, it appears that lawsuits sued by the victims of industrial pollution do have an impact on public health policies, especially when public officials or company managers may be indicted with criminal charges. However, countries like Canada, India, Pakistan, Kazakhstan, Russia and China continue to promote the “safe use” of chrysotile (white asbestos). In those countries, and many other developing countries, the consumption is still increasing. Such a trend puts a major threat on the public health agenda for the years to come and at global level. Except Japan, Korea and Taiwan, Asian countries absorb half of the world production of asbestos. China ranks first for consumption, and number three for production. This means a threat not only for China itself but also for other countries like Taiwan where China exports massively its products (the threat concerns in particular the monitoring of imported construction materials).

SY11-03

Risk Perception and Vaccination Intention against Swine-origin Influenza A H1N1 in the French Population

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Since the emergence of the novel swine-origin influenza A H1N1 the growing number of cases observed worldwide had set off the implementation of programs planned to contain and mitigate what was now defined as a pandemic influenza. Consequently, all countries are trying to combine pharmaceutical and non-pharmaceutical measures to reduce the risk of a large scale epidemic. Among the former, the development of a vaccine expected to be operational on the end of October 2009, represents for health authorities of several countries the main efficient strategy to reduce the attack rate and the severe consequences associated with. In France, decision was taken on September 2009 to propose the future vaccine to the entire population. But even if the amount of vaccine will be available timely, the effectiveness of the vaccination campaign largely rests on the willingness of individuals to be

vaccinated against the swine flu. The proportion of the population who would get the vaccine, its profile and the factors that determine vaccination intention represent questions of crucial interest, able to improve the success of the campaign and finally to reduce the size of the epidemic. A survey was realized on June 2009 on a representative sample of the French population (n = 1000) in order to investigate the determinants of protective behaviour and specially of vaccination intention. Based on a questionnaire grounded on main theoretical models of risk perception and illness representations, significant correlations were seeking through bivariate and multivariate analyses. Two models were developed: the first based on variables related to risk perception, the second introducing the experience of seasonal flu, through the variables “having experienced seasonal flu and previous seasonal flu vaccination “. In the final logistic regression analyse two major variables had been found significantly correlated with vaccination intention: worry related to the risk of getting swine-flu and previous experience of seasonal flu vaccination. As more than 60% had never vaccinated against the seasonal flu great concerns arise concerning the effectiveness of campaign of vaccination against swine-flu. Consequently, to increase the rate of the French population who will get the new vaccine, new targeted risk communication programs are needed.

SY11-04

Perspective from APACPH

Wen-Ta Chiu

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(More detail will be presented during the talk)

Symposium 12- Panel Discussion (Oral Cancer)

SY12-01

The Pathological Basis and the Role of Oral Pathologist in Prevention of Oral Cancer

Professor E. A. Prasad D. Amaratunga

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Oral Pathologist plays a major role in the management of patients with Oral Cancer. Although the main involvement of the Oral Pathologist is in the definitive histopathological diagnosis of the Oral Cancer, pathologist has to play a significant role in prevention of Oral Cancer at the level of primary, secondary and tertiary prevention.

Sound knowledge on pathogenesis and pathology is necessary in order to design a preventive programme for any disease. Such programmes are best designed by community experts working as a team with pathologists and clinicians. In case of Potentially Malignant Oral Lesions, knowledge about “people at risk – lesions at risk – sites at risk” and its pathological basis would enable focusing on high-risk cases than screening entire

population. Oral Carcinogenesis is a multi stage process involving changes such as initiation, promotion and progression of the potential cells. Habit intervention before the stages of irreversible cell damage would prevent the potential cells from progressing into a malignant neoplasm.

Prediction of prognosis of potentially malignant oral lesions is mainly based on histopathological features. Although histopathological grading of dysplasia has a positive correlation to the risk of malignant transformation of potentially malignant lesions, early recognition of those lesions that would eventually undergo malignant transformation has still been proven to be difficult. Similarly, well-differentiated carcinomas are generally known to have a better prognosis than poorly or undifferentiated carcinomas. Further, the Clearance of tumour margins, depth of invasion, vascular and nerve involvement, lymph node metastasis and pericapsular spread from the lymph nodes bear tremendous importance in prognostic prediction. Such information would be essential for the clinician for planning appropriate treatment and prevent progression of disease at secondary and tertiary levels.

SY12-02

KLK6/KLK7/KLK10 Genes of Oral Squamous Cell Carcinoma

Tien-Yu Shieh

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Objectives: According to Health Statistics of Department of Health in 2007, the mortality of oral cancer in Taiwan has ranked sixth cancer in the entire population.

Our aim is to investigate the association between KLK6/KLK7/KLK10 expressions and oral squamous cell carcinoma (OSCC).

Methods: Between October, 2007 and April, 2009, oral precancerous and cancerous patients were recruited from the Department of Oral and Maxillofacial Surgery and Pathology, Kaohsiung Medical University Hospital, Taiwan. Health controls were recruited from OSCC survey in a southern Taiwan community. After getting the inform consent, 10ml peripheral blood were collected for plasma and DNA extraction. Protein levels were determined using ELISA. JMP statistical software was used to analyze the association.

Results: Sixty-one oral precancer patients, 67 OSCC patients and 30 health controls were recruited in the present study. Table 2 was the demographic data of OSCC, OPL, and health control participants. The mean age in OSCC, OPL, and health control were 52.53, 50.32, 48.43 years, respectively. In these data, all participants were all males, and they had habits of cigarette smoking, betel quid chewing, and alcohol drinking. Protein level data are presented in table 3. KLK6 and 7 protein levels in oral diseases had been trending upper than in health control. KLK6 protein concentration was significantly different between OSCC, oral precancer, and control ($p=0.0178$). We used median in control group protein

concentration be a cut point and separate protein level be two groups. Logistic regression analysis showed that the risk of KLK10 higher than 8.25 ng/ml was 2.53 (95 %CI, 1.04-6.23) for OSCC development from health control. Furthermore, there was a significant correlation between KLK6 and KLK7 protein expression level and the clinical stage of OSCC ($p = 0.048$, $p = 0.0294$, respectively).

Conclusion: We suggest that KLK6, 7, and 10 protein level are associated with an increased risk of the occurrence of oral cancer. Moreover, we observed KLK6 and KLK7 protein level may associated with oral cancer stage. However, further studies are required to clarify the association of these genes with OSCC in other populations.

SY12-03

Practical Technique of Screening for Oral Cancer **Liang-Jiunn Hahn**

National Taiwan University School of Dentistry

The author will present a practical and correct technique of screening for oral cancer. The traditional and common method of screening for oral cancer in Taiwan is as follows:

The examiner and the person who is examined sit face to face on 2 chairs, and the examiner use only 1 or 2 disposable tongue depressors to examine the limited "oral mucosa" of that person. Such a method is prone to cause false negative results, so we had better abandon such practice.

The method used by the author is following:

Let the person who undergoes examination takes a supine position on a special flexible examination chair, the examiner sit at 7-11 o'clock position of his head, and examine his oral mucosa by inspection and palpation, using 2 mouth mirrors in definite order of the sites examined. By such technique, the screening of oral cancer can be performed efficiently and correctly, avoiding to cause false negative results, which is the most important concern in screening for oral cancer.

SY12-04

How to Improve the Efficiency of Oral Cancer Screening-the Experience from the Special Clinic for Betel Quid Chewing Related Diseases

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Objective: Oral cancer is the sixth leading cancer in Taiwan, which makes it as one of the important public issues in this country. For the best strategy to increase the five-year survival rate of oral cancer being early diagnosis and treatment, therefore, how to improve the