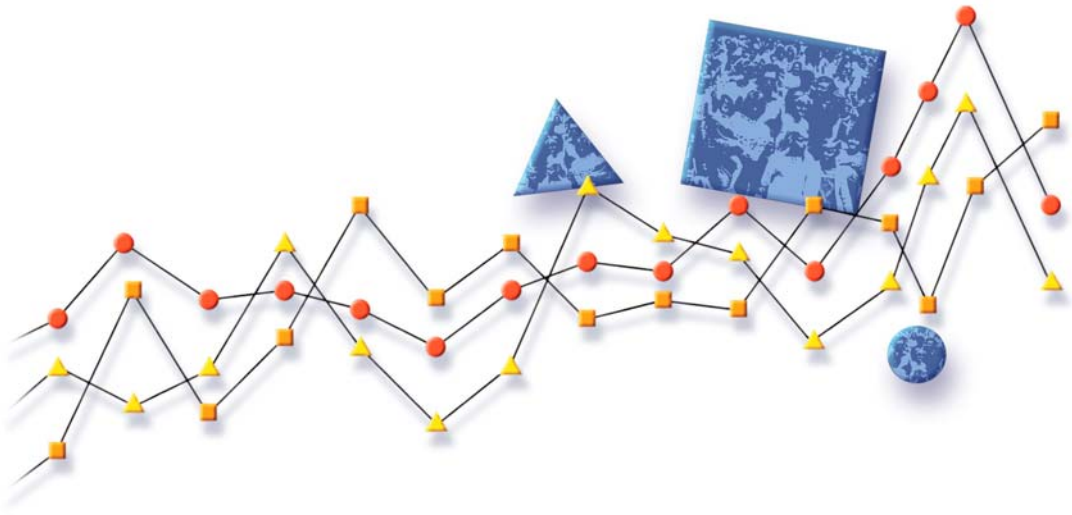
Centre for Public Health Research

Annual Report 2004



Massey University

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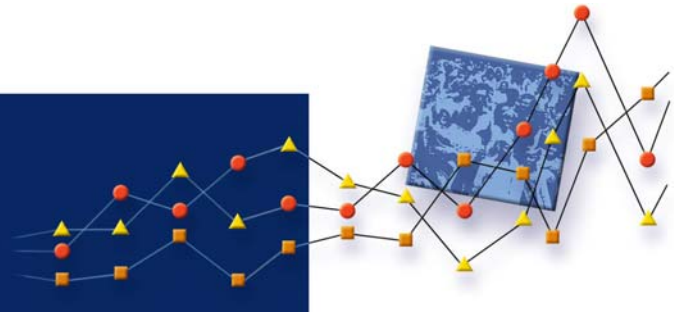

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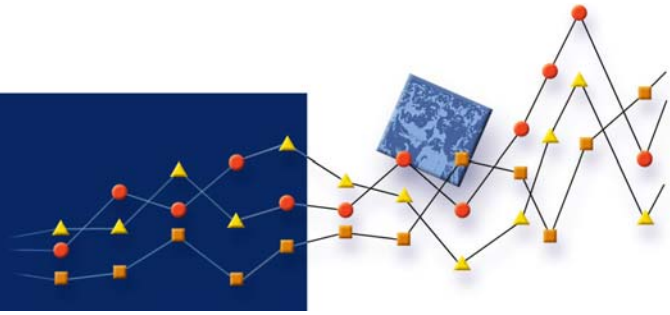
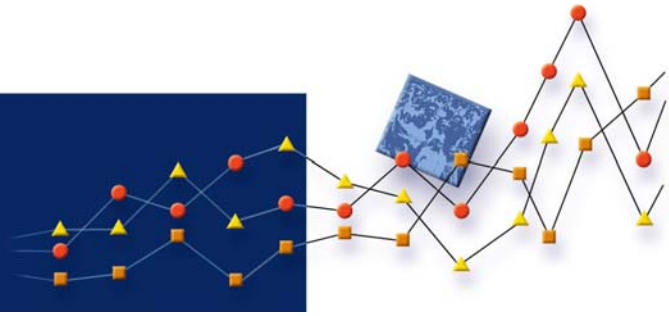


Centre for Public Health Research



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Jeroen Douwes – Associate Director

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Researchers

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Amanda Eng – Research Fellow

Andrea ‘t Mannetje – Postdoctoral Research Fellow

Anouk Niesink – Visiting Fellow

Ate Moala – HRC Pacific Health Research Training Fellow

Christine van Dalen – Postdoctoral Research Fellow

Dave McLean - Postdoctoral Research Fellow

Elizabeth Harding – Research Fellow

Fiona McKenzie – Research Fellow

Heather Duckett – Research Fellow

Karen Blakey – Research Fellow

Ken Huang – Research Fellow

Lis Ellison-Loschmann – HRC Erihapeti Rehu-Murchie Postdoctoral Research Fellow

Michelle Gray – Māori Health Research Fellow

Mona Jeffreys – Postdoctoral Research Fellow

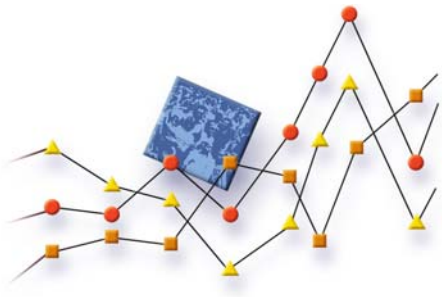
Naomi Brewer – Research Fellow

Rochelle Berry – Research Fellow

Sunia Foliaki – Wellcome Trust Research Fellow

Tania Slater – Māori Health Research Fellow

Tom Jeavons – Visiting Fellow



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Joanne Dow
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Kelly Gray
Lindsey Duckett
Pam Terry
Rebecca Jones
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Tracey Whaanga
Trish Knight
Zoe Harding

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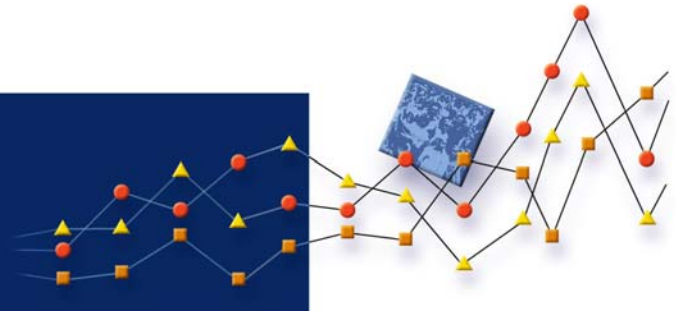
Barry Borman – Epidemiology
Bill Glass – Occupational Health
Chris Walls – Occupational Health
Deborah Read – Public Health
Diana Best – Cancer Control
Evan Dryson – Occupational Health
Phil Shoemack – Public Health
Wendyl D'Souza – Neuroepidemiology

Waiora

Cindy Kiro – Associate Professor and Director of Waiora (currently on leave)

Introduction

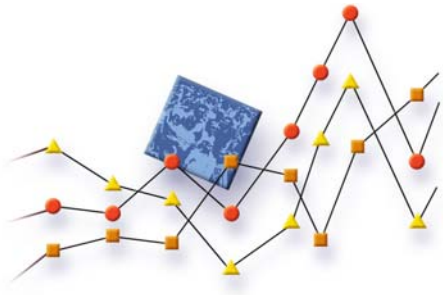


The Centre for Public Health Research is a multi-disciplinary team of researchers based on the Massey University Wellington campus. It is part of the Massey University Research School of Public Health, together with the Research Centre for Māori Health & Development, the Sleep/Wake Research Centre, the Social and Health Outcomes Research and Evaluation (SHORE) Centre and Whariki.

The Centre for Public Health Research was established in 2000. Our research programme covers all aspects of public health research, but with a focus on:

- Non-communicable disease (respiratory disease, cancer, diabetes)
- Māori health
- Pacific health
- Occupational health
- Environmental health
- Socio-economic determinants of health

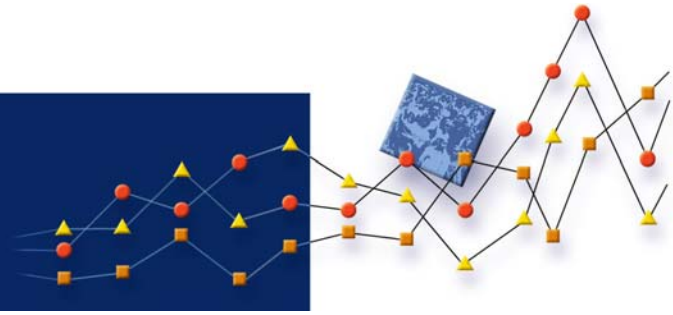
The Centre for Public Health Research recognizes the importance of the Treaty of Waitangi and its relevance to our work. We have a long history of involvement with Māori research and policy development including the Māori Asthma Review, the Wairarapa Māori Asthma Project, and the Hauora Tamariki project. Much of our Māori health research is done in collaboration with the Research Centre for Māori Health & Development, and our Māori asthma research involves a formal link with the Māori Committee of the Asthma and Respiratory Foundation of New Zealand. We are also committed to employing and training Māori health researchers.



The Centre is based in the College of Humanities and Social Sciences, but we also work with researchers at other Massey Colleges and campuses, as well as with researchers at other institutions including the Malaghan Institute for Medical Research (MIMR), the Airway Research Centre (John Hunter Hospital, Newcastle, Australia), Public Health Intelligence (Ministry of Health), Occupational Safety and Health (OSH), the Health Services Research Centre (Victoria University), the Population and Environmental Health Group of the Institute for Environmental Science and Research (ESR), the Massey University Veterinary Epicentre, the Institute for Risk Assessment Sciences (IRAS) at the University of Utrecht (The Netherlands), the US National Cancer Institute (NCI), the Institut Municipal d'Investigacio Medica (IMIM, Barcelona), the Postgraduate School of Occupational Health (Milan, Italy), the Department of Epidemiology and Preventive Medicine (Monash University, Melbourne), and the International Agency for Research on Cancer (IARC).

Although our main activity is research, we also work with organisations such as the Ministry of Health, Occupational Safety and Health (OSH), the Accident Compensation Corporation (ACC) and various non-governmental organisations, unions and companies to ensure that the findings of research are relevant to, and applied in, public health policy. In particular, we have served on a number of advisory committees for the Health Research Council, the Ministry of Health, ACC and OSH.

The Year in Review

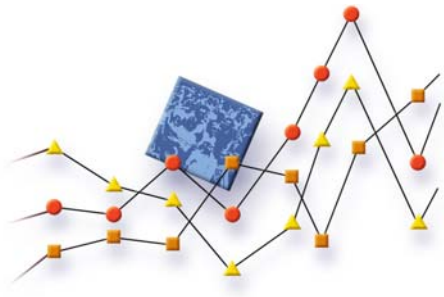


The last year has seen major developments in the work of the Massey University Centre for Public Health Research (CPHR) with the commencement of the Master of Public Health (MPH) programme, and considerable success in obtaining new research funding.

The Research School of Public Health was launched in May 2003 by the Minister of Health (Hon Annette King) and comprises the CPHR, the Research Centre for Māori Health & Development (Professor Chris Cunningham, Director), the Social and Health Outcomes Research and Evaluation (SHORE) Centre (Professor Sally Casswell, Director) and Whariki (Helen Moewaka-Barnes, Director), and the Sleep/Wake Research Centre (Professor Philippa Gander, Director). Three of the constituent centres are based in our building on the Massey Wellington campus.

Despite the current severe shortage of health research funding, we had a successful year with more than $1.6 million of new funding, including the award of a Health Research Council (HRC) Māori Health Postdoctoral Research Fellowship to Lis Ellison-Loschmann, a new Project Grant and a new Strategic Development Grant from the Health Research Council (HRC), and a number of other research grants in asthma, cancer, and occupational health from Lotteries Health Research, the Cancer Society of New Zealand, OSH, and the Ministry of Health.

Respiratory disease



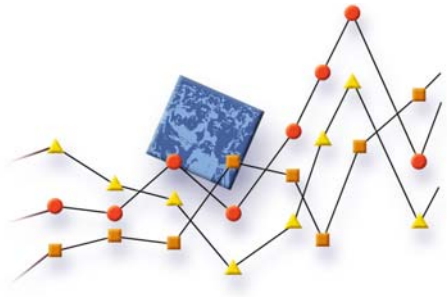
Our asthma research programme has been enhanced by the award of an HRC Sir Charles Hercus Fellowship to Jeroen Douwes for asthma epidemiology, and a Massey University Postdoctoral Research Fellowship to Dr Christine van Dalen for clinical asthma studies. We are currently conducting two HRC-funded projects, both of which are being conducted in collaboration with the Malaghan Institute for Medical Research.

The first study is examining the protective factors of farming on asthma in farmers' children and their parents.

The second study is investigating the hypothesis that endotoxin exposure later in life may reverse pre-existing allergies and allergic diseases. We will do this in a prospective cohort of previously unexposed allergic adults who are starting a work career in industries with moderate to high endotoxin exposures. If endotoxin exposure is indeed associated with a lower prevalence of allergies in adults then potentially vaccines could be developed not only to protect but also potentially to treat allergic disease (e.g allergic asthma, hay fever, eczema), both in children and in adults.

We are also continuing to work on the International Study of Asthma and Allergies in Childhood (ISAAC). Neil Pearce is a member of the ISAAC Executive and the ISAAC Steering Committee. Sunia Foliaki is Regional Coordinator for Oceania and a member of the Steering Committee. We have completed the ISAAC Phase III study in Wellington, and in Tonga, Fiji Islands, Cook Islands, Samoa, Niue, Tokelau Islands, French Polynesia and New Caledonia.

Cancer



Our cancer research programme has been greatly enhanced by the arrival of Dr Mona Jeffreys as a Postdoctoral Research Fellow in cancer epidemiology, and the award to Lis Ellison-Loschmann of an HRC Erihapeti Rehu-Murchie Postdoctoral Research Fellowship in cancer epidemiology. The programme now not only includes studies of occupational cancer (see below), but also studies of cancer survival (with funding from Lotteries Health Research) and a case-control study of breast cancer. The Māori component of the latter study is currently funded and we are seeking funding for the Pacific and non-Māori non-Pacific components.

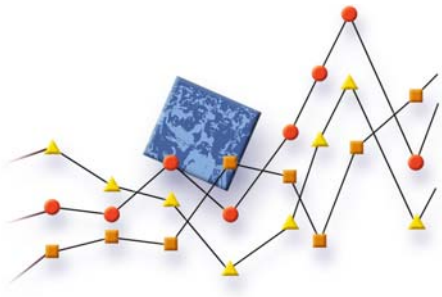
Occupational and Environmental Health

Our occupational health research programme has been greatly enhanced by the arrival of Dr Andrea ‘t Mannetje as a Postdoctoral Research Fellow.

We have received funding from the HRC, Occupational Safety and Health (OSH), Lotteries Health Research and the Cancer Society of New Zealand to conduct a series of case-control studies of bladder cancer, non-Hodgkin’s lymphoma, leukemia and nasopharyngeal cancer, to quantify the proportion of cases of these cancers due to known occupational exposures, and to identify new occupational causes of these cancers.

During 2003 we also received funding from the HRC for a study of the current and future burden of occupational ill health in New Zealand. In addition we received funding from the HRC and OSH for a study of health outcomes in former New Zealand timber workers exposed to pentachlorophenol (PCP).

Māori Health



During 2004 we completed an investigation of asthma in Māori adolescents, conducted by Lis Ellison-Loschmann, and Michelle Gray. Asthma prevalence is similar in Māori and non-Māori children, but Māori suffer from more severe asthma and more long-term problems. This study involved surveying Māori adolescents, with current asthma symptoms, to examine the relationship between asthma severity and access to asthma education and asthma health care in this young population.

We also worked with Te Runanga o Whaingaroa to complete a report on Te Hauora Tamariki o Whaingaroa. This project was initiated by Dr Cindy Kiro and the Runanga prior to Dr Kiro taking leave to become the Commissioner for Children.

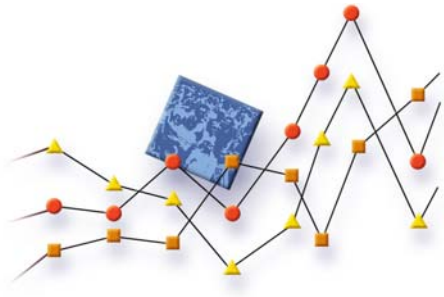
Pacific Health

Massey University has signed a Letter of Understanding with the Tongan Ministry of Health to work together on joint research projects.

Sunia Foliaki is coordinating the ISAAC Phase III study in the Pacific. The ISAAC Phase III study is currently being conducted in Tonga, Samoa, Fiji Islands, Cook Islands, Niue, and the Tokelau Islands. Further studies include an asthma self-management trial in Tonga funded by the Wellcome Trust, and a study of cancer in Pacific populations (Tonga, Samoa, Niue, Fiji) funded by the HRC.

Ate Moala is conducting research into the development of a health promotion model for fanau Pasifiki and their families with funding from an HRC Pacific Health Research Training Fellowship.

Teaching



In 2004 we conducted introductory short courses in epidemiology and spatial epidemiology. We also hosted an International Agency for Research on Cancer (IARC) cancer epidemiology training course in Tonga, and a short-course in Research Methods in Occupational Epidemiology as part of the 17th International Symposium on Epidemiology in Occupational Health in Melbourne

The Massey University Research School of Public Health Master of Public Health (MPH) Programme includes a Postgraduate Diploma in Public Health (PGDipPH) which involves the equivalent of one year fulltime study (four 25 point papers of which two are compulsory – the core paper, and a research project). The programme will involve an applied approach to public health education and training that is different from existing public health qualifications, integrating public policy more strongly with public health, and also providing the opportunity for a greater emphasis on Māori health and Pacific health. Formal courses will start 2005, but an MPH-by-thesis option was available in 2004 for candidates who have already completed an equivalent of the PGDipPH.

Concluding Remarks

In closing we wish to thank all research collaborators involved in our various projects who have played an important role in ensuring a productive year, the agencies who have funded this programme of research, and all those who have participated in our studies.

We also wish to thank Massey University and its staff for its excellent support for our research programme.

Research Projects
Projects completed during 2004

1. Causes of morbidity, and factors affecting access to health services in Māori adolescents with asthma

AIMS:

1. To estimate the proportion of Māori students, with asthma or asthma symptoms, who are receiving asthma medication, asthma education and using asthma management plans.
2. To identify what factors affect asthma severity in Māori students.
3. To identify and describe barriers to accessing asthma health care and asthma education experienced by Māori students.
4. To identify factors contributing to asthma quality of life in this population.

FUNDING: Health Research Council of New Zealand

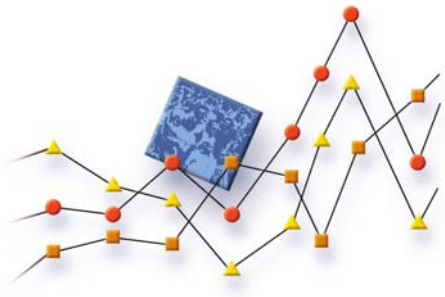
RESEARCHERS: Lis Ellison-Loschmann, Michelle Gray, Neil Pearce, Soo Cheng, Karen Blakey, Aroha Webby

KEY WORDS: Asthma, Respiratory Disease, Māori

KEY FINDINGS:

- Less than half of the participants had a peak flow meter and only 8% had a written asthma action plan. Only 45% had received asthma education in the last 12 months.
- Just over half (52%) of the students had run out of medication in the last 12 months.
- Baseline asthma severity is an important determinant of subsequent asthma severity.
- Controlling for baseline severity, significant predictors of subsequent asthma severity included having had access problems in the previous 12 months and current smoking.
- Cost was the most significant barrier for study participants to accessing care.
- Improvements in asthma quality of life during the one year follow-up period of the study were associated with having an asthma action plan, having a peak flow meter and having made a routine visit to the GP in the previous 12 months.

2. Cause-specific mortality in a cohort of diabetes patients



AIMS:

1. To investigate mortality rates among people with Non-Insulin Dependent Diabetes Mellitus.
2. To investigate whether total mortality and cause-specific mortality differ with birth cohort, socioeconomic status or with ethnic group.

RESEARCHERS: Mona Jeffreys, Andrea 't Mannetje, Neil Pearce

COLLABORATORS: Craig Wright, Dr Barry Borman (Public Health Intelligence, Ministry of Health)

KEY WORDS: Diabetes, Mortality

KEY FINDINGS:

- All cause mortality was three times higher in the cohort of patients who had been admitted to hospital for diabetes compared to the general population.
- Ethnic-specific Standardised Mortality Ratios (SMRs) in Māori with diabetes were higher than SMRs in the non-Māori/ non-Pacific population.
- People with diabetes also had a two and a half times higher risk of dying from cancer compared to the general population.
- The cancer sites at which patients with diabetes were at a higher risk of dying compared to the general population included colon, breast, prostate, lung, lymphomas and leukaemias.

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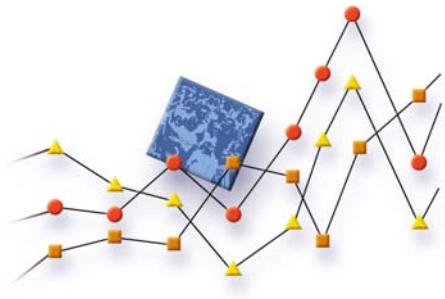
3. Te Hauora o nga Tamariki o Whaingaroa



AIMS:

1. To gather baseline information on the health status of Māori children and young people within the Whangaroa County area.
2. To understand what hauora means for Māori within this area and how this applies to Māori children and young people.
3. To develop the research capacity of this community to undertake health research in the future.

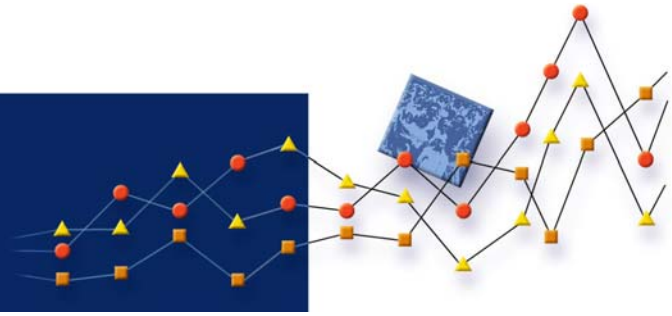
COLLABORATORS: Judy Steele, Patricia Tauroa, Roger Barton (Te Runanga o Whaingaroa), Associate Professor Ian Hassall, Michael Belgrave (Massey University)

CPHR RESEARCHERS: Cindy Kiro, Lis Ellison-Loschmann, Michelle Gray, Neil Pearce

KEY WORDS: Māori Health, Tamariki, Rangatahi

KEY FINDINGS:

- The Whangaroa community has a relatively low level of socioeconomic status.
- Māori hospitalisation rates were higher than for non-Māori in Whangaroa.
- About one in five hospitalisations for Māori were for an avoidable condition.
- Kaumatua and kuia identified cultural considerations to be important for health service delivery in this community.
- Access to appropriate prevention and treatment services for respiratory conditions and glue ear were essential.
- Some health promotion activities appear to be effective with high rates of breastfeeding and immunisation within the community.



4. The current and future burden of occupational ill health

AIMS:

1. To assess, through telephone interviews, current exposures and work practices in a random sample of the workforce.
2. To conduct more detailed exposure assessments in selected key industries through workplace visits, more detailed questionnaires, industrial hygiene measurements, and ergonomic assessments.
3. To further develop a New Zealand Job-Exposure-Matrix (NZ JEM) based on the categories of the New Zealand Standard Classification of Occupations (NZSCO).
4. To conduct analyses of occupational differences in mortality and cancer registration rates in New Zealand during 1998-2002 (with Public Health Intelligence, Ministry of Health).
5. To assess the current burden of occupational ill-health in New Zealand (with Occupational Safety and Health (OSH)).
6. To identify current and emerging hazards that account for, or will account for, a significant burden of occupational ill-health.

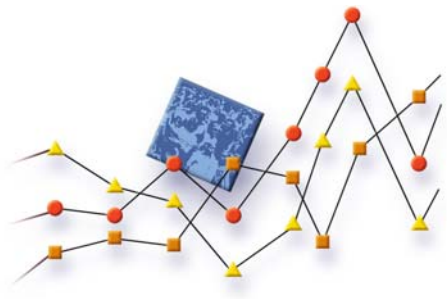
FUNDING: Health Research Council of New Zealand and Occupational Safety and Health (OSH)

RESEARCHERS: Neil Pearce, Bill Glass, Dave McLean, Andrea ‘t Mannetje, Lis Ellison-Loschmann, Jeroen Douwes, Amanda Eng, Karen Blakey, Soo Cheng, Deborah Read

COLLABORATORS: Professor Philippa Gander (Sleep/Wake Research Centre), Professor Stephen Legg, Dr Ian Laird (Centre for Ergonomics, Occupational Safety and Health), Dr Barry Borman, Craig Wright (Public Health Intelligence)

KEY WORDS: Occupational Health, Exposures

5. Development of a model of health promotion for fanau Pasifiki and their families



AIMS:

1. To determine: (a) what constitute measurable positive Pacific health outcomes; (b) the key health indicators; (c) effective health promotion service delivery mechanisms; (d) the criteria for effective health promotion for fanau Pasifiki and their families.
2. To develop a Pacific health promotion model.
3. To perform an evaluation for the model on several 'case-study' health promotion programmes.

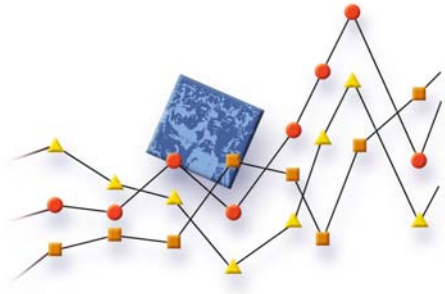
FUNDING: Health Research Council of New Zealand

RESEARCHERS: Ate Moala

COLLABORATORS: Dr Sitaleki Finau (Fiji School of Medicine)

KEY WORDS: Health Promotion, Pacific Health

6. Asthma causation, mechanisms and prevention

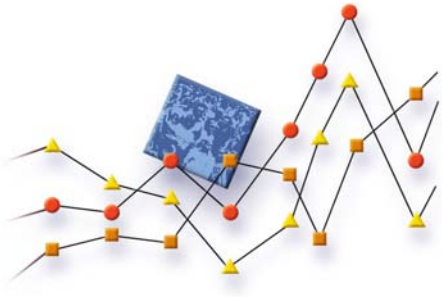


AIMS:

1. To assess whether atopic sensitisation can be reversed over time in a working adult population newly exposed to moderate to high levels of endotoxin.
2. To assess whether there is a dose-response between endotoxin exposure and change in atopic status.
3. To assess the time period in which the reduction in atopy takes place.
4. To assess the association between endotoxin exposure and lung function and respiratory symptoms.
5. To assess whether a change in atopic status is associated with a change in lung function and respiratory symptoms.
6. To assess the level of exposure at which the protective effect on atopy is most effective and the adverse effects on the airways (induced by non-atopic mechanisms) are minimal.

FUNDING:	Health Research Council of New Zealand
RESEARCHERS:	Jeroen Douwes, Dave McLean, Neil Pearce, Christine van Dalen, Elizabeth Harding, Lis Ellison-Loschmann, Amanda Eng
COLLABORATORS:	Professor Graham Le Gros, Dr Jacquie Harper (Malaghan Institute of Medical Research)
KEY WORDS:	Asthma, Respiratory Disease, Occupational Health

7. ISAAC (International Study of Asthma And Allergies In Children). Phase III



AIMS:

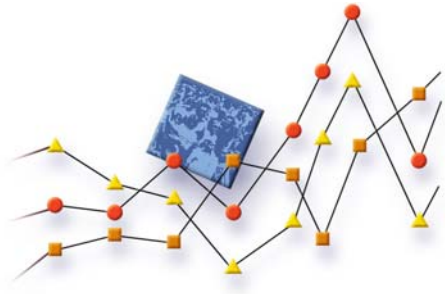
1. To describe the prevalence and severity of asthma, rhinitis and eczema in children living in different centres and to make comparisons within and between countries.
2. To conduct ecologic analyses of the association of asthma prevalence with factors such as diet, infections, immunisation, air pollution and allergen levels.
3. To examine trends in asthma prevalence over time.
4. To provide a framework for further etiological research into genetic, lifestyle, environmental and medical care factors affecting these diseases.

The International Study of Asthma and Allergies in Childhood (ISAAC) was developed and organized together with colleagues in Auckland, London and Münster. This study now includes more than 1,000,000 children in more than 280 centres in 100 countries. Our involvement includes:

- Sunia Foliaki is Regional Coordinator for Oceania and a member of the ISAAC Steering Committee.
- We are participating in the New Zealand ISAAC Phase III survey, and have conducted the survey in Wellington.
- Neil Pearce is a member of the ISAAC Executive and ISAAC Steering Committee, and is the ISAAC Publications Co-ordinator.

FUNDING:	Health Research Council of New Zealand (HRC), Wellcome Trust
RESEARCHERS:	Neil Pearce, Lis Ellison-Loschmann, Sunia Foliaki, Soo Cheng
COLLABORATORS:	Professor Innes Asher (Auckland Medical School), Professor Bengt Björkstén (Karolinska Institute, Stockholm), Professor David Strachan (St George's Hospital Medical School, London), Professor Stephan Weiland (University of Ulm, Germany) and many other colleagues in more than 280 centres in 100 countries
KEY WORDS:	ISAAC, Asthma, Respiratory Disease, Child Health

8. Non-allergic causes of asthma



AIMS:

1. To study airway inflammation in asthmatic and non-asthmatic children.
2. To assess whether childhood asthma can be divided into two (or more) inflammatory sub-types: allergic and non-allergic asthma.
3. To assess the relative importance of non-allergic asthma in a random sample of asthmatic children.
4. To assess whether allergic and non-allergic asthmatics differ with respect with bronchial re-activity, skin prick test results, disease severity and medication use.

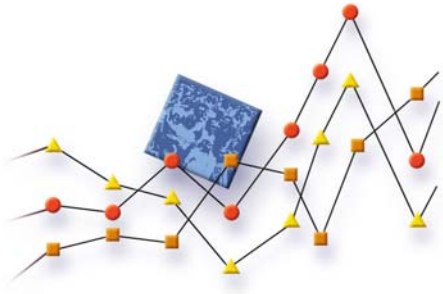
FUNDING: Health Research Council of New Zealand, Lotteries Health Research

RESEARCHERS: Jeroen Douwes, Christine van Dalen, Elizabeth Harding, Alice Paul, Neil Pearce, Catherine Cohet, Karen Blakey, Soo Cheng

COLLABORATORS: Professor Graham Le Gros, Dr Jaquie Harper (Malaghan Institute), Professor Peter Gibson, Jodie Simpson (John Hunter Hospital, Newcastle, Australia), Dr Ian St George, Dr Wallace Farquhar (John St Doctors), Dr Angela Zacharasiewicz (University of Vienna), Professor Chris Cunningham (Research Centre for Māori Health & Development)

KEY WORDS: Asthma, Respiratory Disease, Child Health

9. Health outcomes of former New Zealand timber workers exposed to pentachlorophenol (PCP)

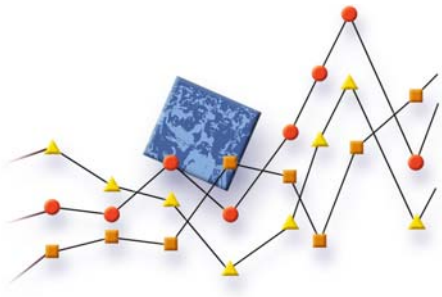


AIMS:

1. To ascertain whether timber workers exposed to PCP are dying more often than other workers of comparable sex and age.
2. To ascertain whether timber workers exposed to PCP are getting cancer more often than other workers of comparable sex and age.
3. To ascertain whether timber workers exposed to PCP are experiencing more hospital admissions than other workers of comparable sex and age.

FUNDING:	Health Research Council of New Zealand (HRC), Occupational Safety and Health (OSH)
RESEARCHERS:	Neil Pearce, Dave Mclean, Andrea 't Mannetje, Chris Walls, Evan Dryson, Lis Ellison-Loschmann, Tania Slater
COLLABORATORS:	Dr Phil Shoemack (Bay of Plenty District Health Board), Dr Barry Borman (Public Health Intelligence, Ministry of Health)
KEY WORDS:	Cancer, Occupation, Chronic Disease, Timber Workers

10. Early life factors and breast cancer risk

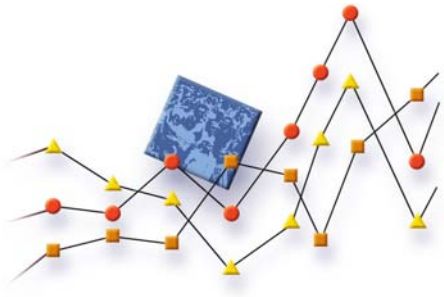


AIMS:

1. To assess adolescent exposures which may be pertinent to breast cancer risk.
2. To investigate the relationship between the potential risk factors and breast cancer risk in the New Zealand population.
3. To investigate whether these relationships differ between ethnic groups.
4. To follow the cases to assess which factors affect cancer survival.

FUNDING:	Health Research Council of New Zealand; Cancer Society of New Zealand
RESEARCHERS:	Mona Jeffreys, Lis Ellison-Loschmann, Ate Moala, Sunia Foliaki, Neil Pearce
COLLABORATORS:	Dr Simon Baker (Ministry of Health), Dr Siale 'Akau'ola (Ministry of Health, Tonga), Peter Dady (Cancer Society of New Zealand), Professor George Davey Smith (University of Bristol, United Kingdom)
KEY WORDS:	Breast Cancer, Early Life Factors, Life-course Epidemiology

11. Cancer in Pacific populations

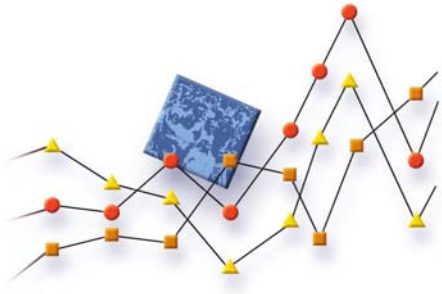


AIMS:

1. To conduct descriptive analyses of cancer incidence and mortality in four Pacific countries (Tonga, Samoa, Fiji and Niue) and in Pacific people in New Zealand.
2. To conduct a case-control study of breast cancer in women which will be conducted in the same four Pacific countries in parallel with a similar study of Pacific women in New Zealand.

FUNDING:	Health Research Council of New Zealand
RESEARCHERS:	Sunia Foliaki, Mona Jeffreys, Ate Moala, Lis Ellison-Loschmann, Neil Pearce
COLLABORATORS:	Dr Lepani Waqatakirewa (Ministry of Health, Fiji), Dr Siale 'Akau'ola (Ministry of Health, Tonga), Dr Semisi Aiono (Ministry of Health, Samoa), Dr Hale Paka (Department of Health, Niue), Dr Paolo Boffetta (International Agency for Research on Cancer, Lyon, France), Dr Marc Goodman (University of Hawaii), Professor George Davey Smith (University of Bristol, United Kingdom)
KEY WORDS:	Cancer, Breast Cancer, Pacific

12. Asthma and atopy in farmers' children and their parents

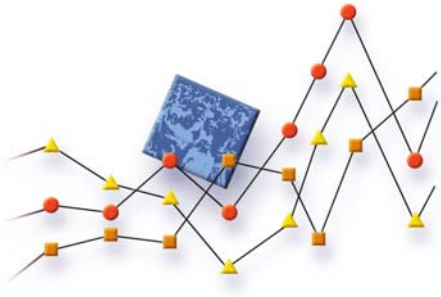


AIMS:

1. To measure the prevalence of respiratory symptoms (with the focus on asthma) in farmers' children and their parents, and in a comparison group from a non-farming population.
2. To compare the prevalence of respiratory symptoms in children and parents in various types of farming (dairy, sheep & beef, and crop farming).
3. To measure the prevalence of atopy in a sample of children and their parents (farming and non-farming) in order to ascertain whether any protective effect of farming involves atopic mechanisms.
4. To measure relevant environmental exposures in a sample of households (farming and non-farming) including house dust allergen and endotoxin, and to examine their association with the occurrence of atopy and asthma, while adjusting for other risk factors for asthma.

FUNDING:	Health Research Council
RESEARCHERS:	Jeroen Douwes, Neil Pearce, Soo Cheng, Elizabeth Harding, Alice Paul, Heather Duckett, Michelle Gray.
COLLABORATORS:	Dr Joanna McKenzie (Massey University Veterinary Epicentre), Professor Graham Le Gros, Dr Jacquie Harper (Malaghan Institute of Medical Research), Dr Erika Von Mutius (University Children's Hospital, Munich, Germany), Professor Chris Cunningham (Research Centre for Māori Health & Development)
KEY WORDS:	Asthma, Respiratory Disease, Child Health, Occupation

13. Occupational cancer in adult New Zealanders

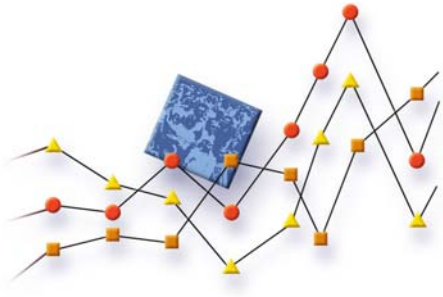


AIMS:

1. To obtain an overview of the importance of occupational factors for these cancer types in New Zealand.
2. To quantify the proportion of cases due to known occupational causes.
3. To identify new occupational causes of these cancers.

FUNDING:	Health Research Council, Lotteries Health Research
RESEARCHERS:	Evan Dryson, Chris Walls, Dave Mclean, Neil Pearce, Soo Cheng, Andrea ‘t Mannetje, Fiona McKenzie.
COLLABORATORS:	Jenny West (OSH), Professor Hans Kromhout (IRAS, University of Utrecht, The Netherlands), Dr Paolo Boffetta (IARC, Lyon, France), Dr Aaron Blair (NCI, Washington DC, USA), Professor Chris Cunningham (Research Centre for Māori Health & Development)
KEY WORDS:	Occupation, Cancer

14. Microbial and arsenic content of roof, well and public water supplies in rural New Zealand communities and impact on health

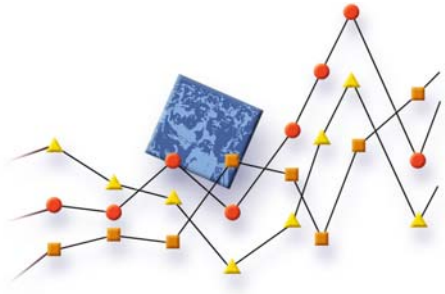


AIMS:

1. To assess the microbial water quality of roof, well and public water supplies in rural New Zealand.
2. To assess arsenic levels in roof, well and public water supplies in rural New Zealand.
3. To measure the association between water quality and health symptoms in rural New Zealand communities.

FUNDING:	Massey University
RESEARCHERS:	Jeroen Douwes, Neil Pearce, Soo Cheng, Elizabeth Harding, Alice Paul, Heather Duckett
COLLABORATORS:	Stan Abbott (Institute of Food, Nutrition & Human Health, Massey University)
KEY WORDS:	Water Quality, Arsenic, Health, Farming

15. Determinants of survival in cancer

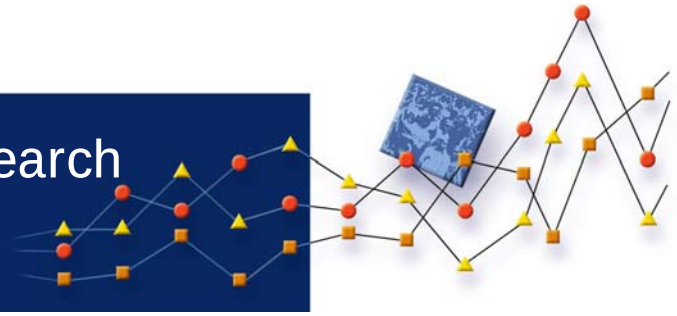


AIMS:

1. To document cancer survival rates in New Zealand and investigate whether these are comparable to those in other developed countries.
2. To describe differences in cancer survival rates in New Zealand according to gender, socio-economic status and ethnicity.
3. To quantify the proportion of the socio-economic and ethnicity differences which are attributable to differences in age or extent of disease at presentation.

FUNDING:	Lotteries Health Research
RESEARCHERS:	Mona Jeffreys, Lis Ellison-Loschmann, Sunia Foliaki, Neil Pearce
COLLABORATORS:	Craig Wright, Dr Barry Borman, Dr Martin Tobias (Public Health Intelligence, Ministry of Health), Dr Tony Blakely (Wellington School of Medicine), Dr Vladimir Stevanovic (NZ Health Information Service, Ministry of Health).
KEY WORDS:	Cancer, Survival

Projects Based in Other Research Groups and Institutions



1. Health effects of mobile (cellular) phones

AIMS:

1. To investigate whether mobile phone use causes brain cancer.

2. To investigate occupational causes of brain cancer.

COLLABORATORS: Professor Alistair Woodward (University of Auckland), Dr Angus Cook, Dr Tony Blakely (Wellington School of Medicine), Dr Elizabeth Cardis (IARC)

CPHR RESEARCHERS: Dave McLean, Neil Pearce

KEY WORDS: Cancer, Environmental Health

2. The New Zealand Census Mortality Study

AIM:

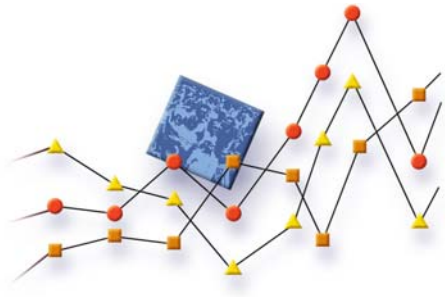
To investigate measure socio-economic differences in mortality New Zealand.

COLLABORATORS: Dr Tony Blakely, Dr Clare Salmond, June Atkinson, Jackie Fawcett (Wellington School of Medicine), Professor Alistair Woodward, Professor Peter Davis (University of Auckland)

CPHR RESEARCHERS: Neil Pearce

KEY WORDS: Social Class, Mortality

3. Occupational cancer in developing countries



AIM:

To update and extend a previously published report on occupational cancer in developing countries.

COLLABORATORS: Dr Paolo Boffetta (International Agency for Research on Cancer), Dr Manolis Kogevinas (IMIM, Barcelona, Spain)

CPHR RESEARCHERS: Neil Pearce

KEY WORDS: Cancer, Occupation, Social Class, Mortality

4. Estimating the long-term health outcomes of people with epilepsy

AIMS:

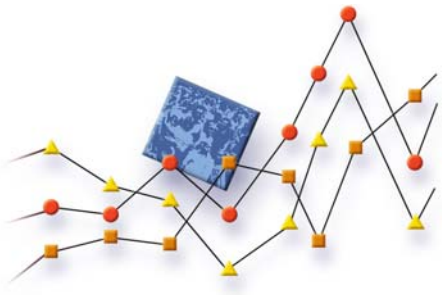
1. To establish an epilepsy register in Tasmania.
2. To undertake a cross-sectional study of this community sample of people with epilepsy to investigate the prevalence of epilepsy syndromes, and their severity, epilepsy-related injuries and health service utilization.
3. To establish a community cohort of people with epilepsy which can be followed prospectively to monitor health outcomes, measure risk factors contributing to these outcomes if indicated (with second stage case-control studies), and perform intervention trials if considered appropriate.

COLLABORATORS: Dr Wendyl D'Souza, Dr Mark Cook, Dr Terry O'Brien (St Vincent's Hospital, Melbourne), Dr Bruce Taylor (Hobart Hospital, Tasmania), Professor Terry Dwyer (Menzies Centre, Hobart, Tasmania)

CPHR RESEARCHERS: Neil Pearce

KEY WORDS: Epilepsy

5. Centre for Māori Health Research and Development (HRC Programme Grant)



AIM:

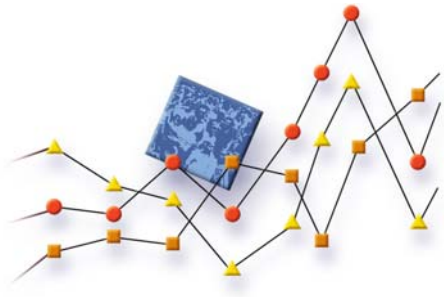
Programme of research in Māori health, including studies of child health, mental health and the health of older Māori (Centre for Māori Health Research and Development HRC Programme Grant).

COLLABORATORS: Professor Mason Durie, Professor Chris Cunningham, Dr Maureen Holdaway, Dr Stephanie Palmer, Dr Te Kani Kingi, John Waldon, Amohia Boulton, Sharon Taite (Research Centre for Māori Health & Development)

CPHR RESEARCHERS: Neil Pearce

KEY WORDS: Māori Health

6. Prevention and Incidence of Asthma and Mite Allergy (PIAMA)



AIMS:

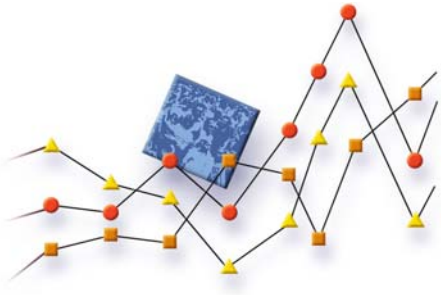
1. To evaluate the effectiveness of house dust mite impermeable mattress covers in the prevention of asthma and respiratory allergy in children at high risk to develop asthma or respiratory allergy.
2. To assess the role of early microbial exposure on the development of asthma and respiratory allergy in children at high risk to develop asthma or respiratory allergy.
3. To investigate the natural history of childhood asthma in high and low risk children in relation to environmental and lifestyle factors.

COLLABORATORS: Professor Bert Brunekreef (Institute for Risk Assessment Sciences, Utrecht University, The Netherlands); Dr Rob van Strien (Utrecht University); Gert Doekes (Utrecht University), Dr Jet Smit (National Institute of Public Health and Environment, Bilthoven), Marjan Kerkhof (Beatrix Children's Hospital, Groningen University), Dr Jorrit Gerritsen (Beatrix Children's Hospital, Groningen University), Dr Rob Aalberse (Central Laboratory of the Blood Transfusion Service, Department of Allergy, Amsterdam), Dr Herman Neijens (Sophia Children's Hospital, Erasmus University, Department of Paediatrics, Rotterdam), Dr Johan de Jongste (Sophia Children's Hospital, Erasmus University, Department of Pediatrics, Rotterdam)

CPHR RESEARCHERS: Jeroen Douwes

KEY WORDS: Asthma, Respiratory Disease, Child Health

7. Protection against Allergy: Study in Rural Environments (PASTURE)



AIMS:

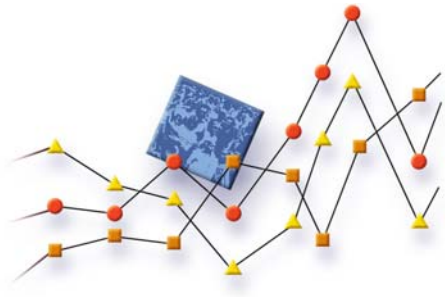
1. To assess whether T-cell effector status is more characteristic of Th1 immunity in farmers' infants at 12 months of age compared to non-farming control infants.
2. To assess whether mothers' exposures during pregnancy to indoor endotoxin, unpasteurised milk, and barn environment are associated with Th1 immunity in their offspring.
3. To assess whether elevated levels of endotoxin in house dust and milk samples are associated with a maturation of initially Th2-like skewed immune responses to Th1 immunity, and a lack of IgE response to common allergens at age 12 months.
4. To assess whether the expression of genes related to the reocognition of microbial products differs with respect to microbial exposures and a subject's genetic background (polymorphisms in these genes).
5. To assess whether subjects with polymorphisms in those genes differ with respect to the relation between environmental exposures and atopic outcomes.

COLLABORATORS: Dr Erika von Mutius (Dr. Von Haunersche Kinderklinik, München, Germany), Dr Charlotte Braun-Fahrländer (Institute for Social and Preventive Medicine, University of Basel, Switzerland), Dr Juha Pekkanen (National Public Health Institute, Kuopio, Finland), Dr Josef Riedler (Childrens Hospital, Salzburg, Austria), Dr Jean-Charles Dalphin (UFR Faculté de Medicine & Pharmacie, Besancon, France), Professor Harald Renz (Marburg, Germany), Professor Bert Brunekreef (Institute for Risk Assessment Sciences, Utrecht, The Netherlands), Dr Michael Kabesch (Munich, Germany), Dr Roger Lauener (Zürich, Switzerland), Professor Stephan Weiland (University of Ulm, Germany)

CPHR RESEARCHERS: Jeroen Douwes

KEY WORDS: Asthma, Allergy, Anthrosophy, Farming, Respiratory Disease, Child Health

8. Prevention of allergy – risk factors for sensitisation in children related to farming and anthroposophic lifestye (PARSIFAL)



AIMS:

1. To assess which specific factors related to farming and anthroposophy offer protection against asthma and allergies.
2. To assess whether microbial exposures in the indoor and stable environment are associated with a reduced risk of asthma and allergies in farmers' and anthroposophic children.

COLLABORATORS: Prof Göran Pershagen (Karolinska Institutet, Sweden), Dr Charlotte Braun-Fahrländer (Institute for Social and Preventive Medicine, University of Basel, Switzerland), Professor Bert Brunekreef (Institute for Risk Assessment Sciences, Utrecht University, The Netherlands), Dr Erika von Mutius (Dr von Haunersche Kinderklinik, München, Germany), Dr Josef Riedler (Childrens Hospital, Dept. of Paediatric Pulmonology, Salzburg, Austria)

CPHR RESEARCHERS: Jeroen Douwes

KEY WORDS: Asthma, Respiratory Disease, Child Health, Occupation

9. The Glasgow Alumni Project

AIM:

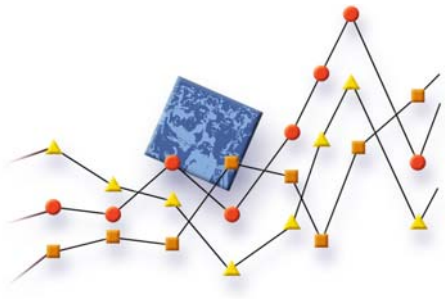
To determine the influence of life-course exposure patterns on disease occurrence in later life.

COLLABORATORS: Professor George Davey Smith, Professor David Gunnell, Dr Sanjay Kinra, Dr Bruna Galobardes (University of Bristol, UK)

CPHR RESEARCHERS: Mona Jeffreys

KEY WORDS: Life-course Epidemiology, Cancer Cardiovascular Disease, Diabetes

10. The Glasgow Alumni Project Mammography Study



AIMS:

1. To describe a novel technique of modeling volumetric breast density.
2. To determine the influence of life-course patterns on volumetric breast density.

COLLABORATORS: Professor George Davey Smith, Professor David Gunnell (University of Bristol, UK), Dr Peter McCarron (Queen's University, Belfast, UK), Ruth Warren (University of Cambridge)

CPHR RESEARCHERS: Mona Jeffreys

KEY WORDS: Life-course Epidemiology, Breast Cancer, Breast Density

11. Cardiovascular disease and oral health: The Glasgow Alumni Study

AIMS:

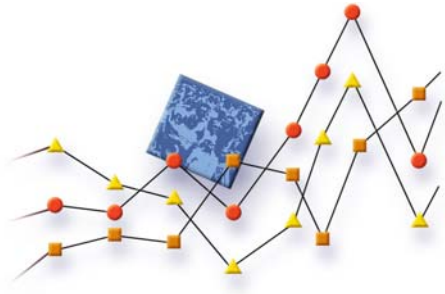
1. To investigate the relationship between cardiovascular disease and oral health, accounting for socioeconomic background.
2. To investigate the relationship between parental socioeconomic background and early adult oral health status.

COLLABORATORS: Dr Mark Gilthorpe, Dr Yu-Kang Tu (University of Leeds), Professor George Davey Smith, Professor David Gunnell Dr Sanjay Kinra, Dr Bruna Galobardes (University of Bristol, UK), Dr Peter McCarron (Queen's University, Belfast, UK)

CPHR RESEARCHERS: Mona Jeffreys

KEY WORDS: Foetal Origins of Adult Disease; Life-course Epidemiology, Cardiovascular Disease, Oral Health

12. IARC multicentre case-control study of occupation, environment and lung cancer in Central and Eastern Europe



AIMS:

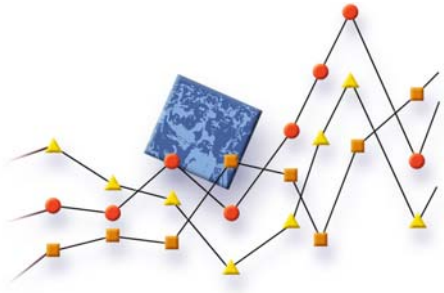
1. Investigate the role of occupational risk factors in the aetiology of lung cancer in Central and Eastern Europe.
2. Investigate other factors including tobacco consumption, air pollution and genetic susceptibility.
3. Conduct this analysis after combining the datasets of individual centers.

COLLABORATORS: Dr Paolo Boffetta (International Agency for Research on Cancer), Dr Tony Fletcher (London School of Hygiene and Tropical Medicine), Dr Joelle Fevotte (Institut Universitaire de Médecine du Travail, UCB, France), Dr Dana Mates (Institute of Hygiene, Public Health, Health Services and Management, Bucharest, Romania), Dr Peter Rudnai (National Institute of Environmental Health, Budapest, Hungary), Dr David Zaridze (Institute of Carcinogenesis, Cancer Research Centre, Moscow, Russia), Dr Eleonóra Fabiánová (Specialized State Health Institute, Banská Bystrica, Slovakia), Dr Witold Zatonski (Maria Sklodowska Institute of Oncology, Warsaw, Poland), Dr Neonila Szeszenia-Dabrowska (Department of Epidemiology, Lodz, Poland), Dr Vladimir Janout (Department of Preventive Medicine, Palacky University of Medicine, Olomouc, Czech Republic), Dr Vladimir Bencko (Charles University of Prague, First Faculty of Medicine, Praha, Czech Republic), Dr Lenka Foretova (Department of Cancer Epidemiology, Masaryk Cancer Institute, Brno, Czech Republic), Dr Judith Youngson (Roy Castle International Centre for Lung Cancer Research, Liverpool, UK)

CPHR RESEARCHERS: Andrea 't Mannetje

KEY WORDS: Lung cancer, Occupation, Tobacco

13. International study of environment, viruses and cancer of the oral cavity and the larynx



AIMS:

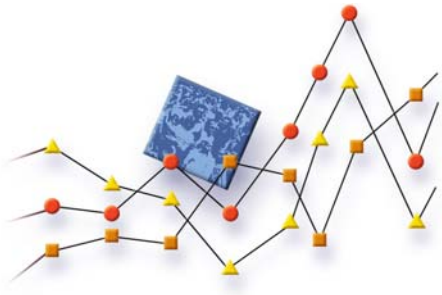
1. To assess the role of known (i.e., occupation, smoking, alcohol drinking, fruit and vegetable intake) or putative (i.e., HPV infection) risk factors for cancer of the oral cavity and the larynx in the study populations.
2. To investigate the presence and pattern of P53 mutations and to assess whether they differ according exposure to risk factors.
3. To assess the role of genetic susceptibility mediated through genetic polymorphisms of enzymes potentially implicated in the metabolism of carcinogens.

COLLABORATORS: Dr Paul Brennan, Dr Paolo Boffetta (International Agency for Research on Cancer), Dr Maria Paula Curado (Registro de Câncer de Goiânia, Associação de Combate ao Câncer em Goiás, Brazil), Dr Alexander Daudt (Cancer Prevention and Control Section, Hospital de Clínicas de Porto Alegre, Brazil), Dr Sergio Koifman (Escola Nacional de Saúde Pública, Fundação Oswaldo Cruz, Brazil), Dr Ana Menezes (Departamento de Clinica Médica, Faculdade de Medicina, Universidade Federal de Pelotas, Brazil), Dr Victor Wünsch-Filho (Departamento de Epidemiologia, Faculdade de Saúde Pública, Universidade de São Paulo, Brazil), Dr Elena Matos (Depto. de Carcinogenesis Quimica y Ambiental, Instituto de Oncologia Angel H. Roffo, Universidad de Buenos Aires, Argentina), Dr Leticia Fernandez (Institute of Oncology and Radiobiology, Havana, Cuba), Dr Jan Walboomers, Dr Peter Snijders (Department of Pathology, Free University Hospital, Amsterdam, The Netherlands), Dr Joelle Fevotte (Institut Universitaire de Médecine du Travail, UCB, Lyon, France)

CPHR RESEARCHERS: Andrea 't Mannetje

KEY WORDS: Oral Cancer, Laryngeal cancer, Lifestyle Factors, Occupation

14. Environmental exposures and lymphoid neoplasms



AIMS:

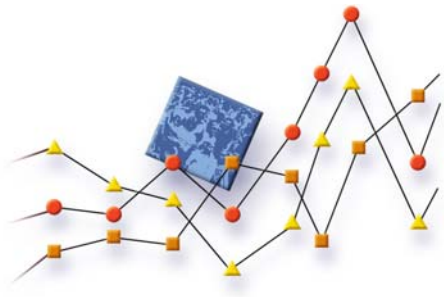
1. To identify the contribution of Epstein-Barr virus, Human Immunodeficiency virus, Hepatitis C virus and Herpes virus 8 to the occurrence of lymphoid neoplasms.
2. To explore the potential associations of other infectious agents (Chlamydia, other related herpes virus, papovavirae virus) to the occurrence of lymphoid neoplasms.
3. To identify the contribution of specific occupational exposures (inorganic pesticides, organic pesticides, animal viruses, organic dust, organic solvents and radiation) to the occurrence of lymphoid neoplasms.
4. To explore the possible interactions between occupational/environmental factors and infectious agents.
5. To explore the possible contribution of exposure to UV radiation to the occurrence of lymphoid neoplasms.

COLLABORATORS: Dr Paul Brennan, Dr Paolo Boffetta (IARC), Dr Silvia de Sanjosé (Oncology Institute, Barcelona, Spain), Dr Marc Maynadie (Hôpital du Bocage, Dijon, France), Dr Nikolaus Becker (German Cancer Research Centre, Heidelberg, Germany), Dr Anthony Staines (Department of Public Health, University College, Dublin, Ireland), Dr Jose Iscovich (International Fertility Institute, Raanana, Israel), Dr Lenka Foretova (Department of Cancer Epidemiology, Masaryk Cancer Institute, Brno, Czech Republic), Dr Martine Vornanen (Department of Clinical Pathology, Kuopio University Hospital, Kuopio, Finland), Dr Pier Luigi Cocco (Institute of Occupational Health, Cagliari, Italy)

CPHR RESEARCHERS: Andrea 't Mannetje

KEY WORDS: Lymphoid Neoplasms, Environmental Exposures, Infectious Agents, Occupational Exposures

15. Social capital: How does social connectedness work to benefit all?



AIMS:

1. To inquire into people's understandings of their connections with others as positive assets.
2. To compare the shared meanings of social connectedness for people across groups of different levels of socioeconomic status.
3. To explore the meaning of social connectedness at different levels of connection, from individual to neighbourhood, to broader groups in society.
4. To inquire into the meaning of place as an aspect of social capital in relation to economic, cultural and symbolic capital.

COLLABORATORS: Dr Christine Stephens (School of Psychology, Massey University)

CPHR RESEARCHERS: Neil Pearce

KEY WORDS: Social Connectedness, Social Capital

16. Work-related determinants of health, safety and well-being of New Zealanders

AIM:

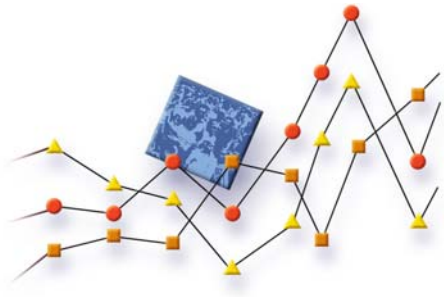
To develop methods and assess the feasibility of characterising work-related hazards in New Zealand, their associated health effects and the impact these hazards may have on different worker socio-economic groups.

COLLABORATORS: Dr Hilda Firth, Dr Dorothy Broom, Peter Herbison, Rebecca Lilley (Dunedin School of Medicine, University of Otago), Dr Peter Crampton (Wellington School of Medicine, University of Otago), Professor Chris Cunningham (Research Centre for Māori Health & Development)

CPHR RESEARCHERS: Neil Pearce

KEY WORDS: Occupational Health

17. Social variation in New Zealand health expectancy trends



AIM:

To investigate changes in social class differences in health expectancy over time.

COLLABORATORS: Professor Peter Davis, Andrew Sporle (University of Auckland), Dr Patrick Graham (Christchurch School of Medicine, University of Otago), Dr Tony Blakely (Wellington School of Medicine, University of Otago)

CPHR RESEARCHERS: Neil Pearce

KEY WORDS: Social Class, Health Expectancy

18. Upper gastrointestinal cancer in Māori

AIM:

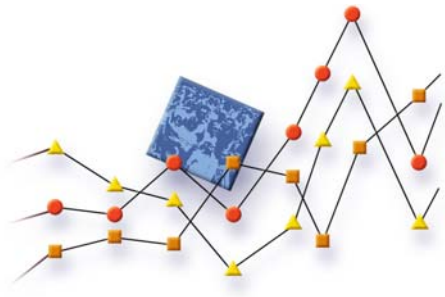
To identify potential points of intervention to reduce both population and individual risk of gastrointestinal cancer in Māori.

COLLABORATORS: Professor Iain Martin, Associate Professor Jonathan Koea, Dr Vanessa Blair, Andrew Sporle (University of Auckland)

CPHR RESEARCHERS: Neil Pearce, Lis Ellison-Loschmann, Mona Jeffreys

KEY WORDS: Māori Health, Cancer

19. Arsenic and childhood respiratory health in Bangladesh



AIMS:

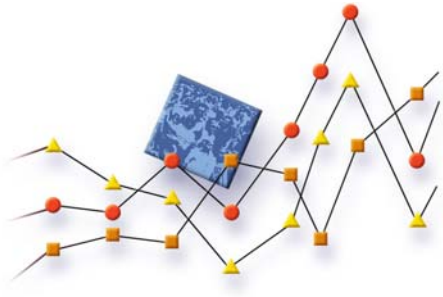
1. Investigate the impact of exposure to arsenic in drinking water on lung function and respiratory symptoms and diseases in children.
2. To assess possible synergy between ingested arsenic and inhaled indoor air pollutants from biomass burning and second hand smoke on lung function and respiratory outcomes in children.
3. To investigate nutritional susceptibility to arsenic-related respiratory effects in children.
4. To assess whether or not methylation of arsenic to MMA3 and MMA5 as measured in urine affects the risks of arsenic-related respiratory system effects in children and to store remaining urine samples for other testing including proteomics.
5. To identify whether children with reduced height-for-age, weight-for-height, or weight-for-age are at increased risk of developing arsenic-related respiratory symptoms and impaired lung function, while considering modifying factors, particularly nutrition.
6. To start a cohort for long-term follow-up into late adolescence and young adulthood to investigate the relation of childhood arsenic exposure and individual arsenic emthylation status with lung function and respiratory effects later in life.

COLLABORATORS: Professor Allan Smith, Dr Ondine von Ehrenstein (University of California, Berkeley)

CPHR RESEARCHERS: Neil Pearce, Jeroen Douwes

KEY WORDS: Arsenic, Asthma, Respiratory Disease, Child Health

20. Domestic environment and lifestyle derminants of childhood asthma in Palestine



AIMS:

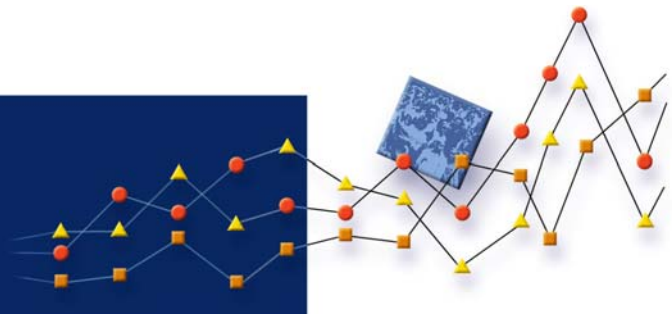
1. To describe the prevalence of asthma and asthma symptoms in different districts in Palestine
2. To obtain baseline measures for assessment of future trends in the prevalence and severity of disease in Palestine
3. To describe “objective” markers of asthma in Palestinian children
4. To assess the relation between the prevalence of these “objective” markers and symptom prevalence
5. To estimate to what extent the variation in the prevalence and severity of childhood asthma in Palestine can be explained by differences in known or suspected risk factors

COLLABORATORS: NA Sharif, F Barghuty, S Mortaja, R Qasrawi, Z Abdeen (Al Quds University, Palestine), B Nemery, PHM Hoet (Leuven University, Belgium), G Doekes, B Brunekreef (Utrecht University, The Netherlands)

CPHR RESEARCHERS: Jeroen Douwes

KEY WORDS: Asthma, Child health, Allergens, Endotoxin, Risk Factors, Protective Factors

Training
MPH theses

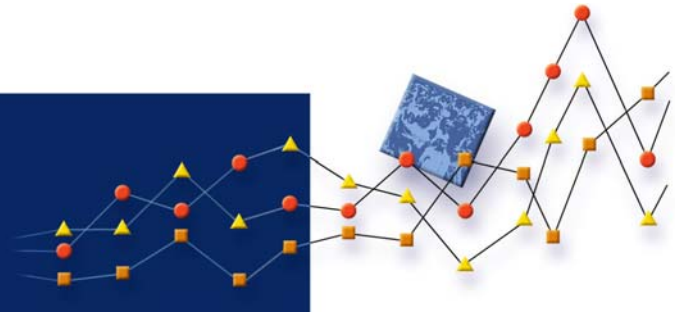


Karen Blakey

Title: WHO Long Form reliability, validity and norms for New Zealand

Supervisors: Neil Pearce and Dr Barry Borman (Public Health Intelligence)

Training
Doctoral



Ate Moala

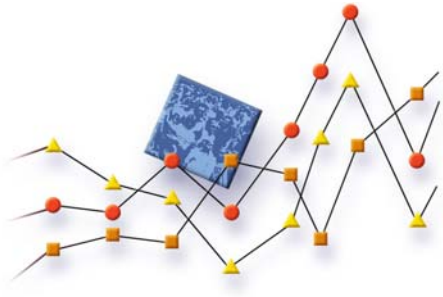
HRC Pacific Health Research Training Fellow
Title: Health promotion in Pacific people
Supervisors: Neil Pearce and Dr Sitaleki Finau (Fiji School of Medicine)

Lis Ellison-Loschmann

HRC Māori Health Research Training Fellow
Title: Asthma in Māori
Supervisor: Neil Pearce
Submitted and awarded 2004

Sunia Foliaki

Wellcome Trust Research Fellow
Title: Epidemiology of asthma in Pacific children
Supervisors: Neil Pearce and Jeroen Douwes



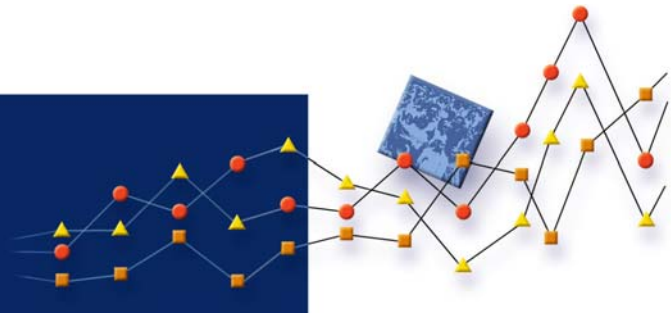
Wendyl D'Souza

Title: Is there a common susceptibility gene for epilepsy?
Supervisors: Neil Pearce and Professor Simon Easteal (ANU, Canberra)

Angus Cook

Title: Brain cancer in cell phone users
Supervisors: Professor Alistair Woodward (University of Auckland) and Neil Pearce

Training
Postdoctoral



Andrea ‘t Mannetje

HRC Postdoctoral Research Fellow (CPHR Programme Grant)
Title: Occupational epidemiology
Supervisor: Neil Pearce

Christine van Dalen

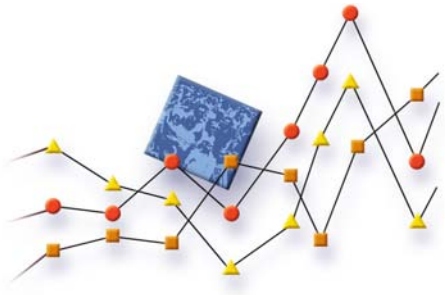
Massey University Postdoctoral Research Fellow
Title: Clinical and epidemiological studies of childhood asthma
Supervisors: Neil Pearce, Jeroen Douwes

Dave McLean

HRC Postdoctoral Research Fellow (CPHR Programme Grant)
Title: Occupational epidemiology
Supervisor: Neil Pearce

Lis Ellison-Loschmann

HRC Māori Health Postdoctoral Research Fellow
Title: Epidemiology and Māori health research
Supervisors: Neil Pearce, Mona Jeffreys, Chris Cunningham (Research Centre for Māori Health & Development)



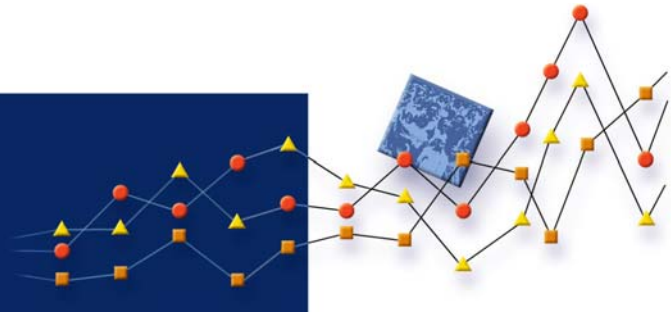
Mona Jeffreys

Massey University Postdoctoral Research Fellow

Title: Cancer epidemiology

Supervisor: Neil Pearce

Annual Symposia in Health Research And Policy



Health Impact Assessment

Illott Theatre, Wellington Town Hall, Thursday, 30th March, 2004

Keynote Speakers:

Dr Alex Scott-Samuel (*University of Liverpool)* – Health Impact Assessment: an idea whose time has come

Associate Professor Nancy Krieger (*Harvard University)* – Assessing Health Impact Assessment

Other Speakers:

Hon Annette King *(Minister of Health)*

Professor Mason Durie *(Massey University)* – Policy and practice: impacts on Māori health

Dr Ate Moala *(Massey University)* - Impacts on Pacific health

Professor Jenny Dixon *(University of Auckland)* – Impact Assessment

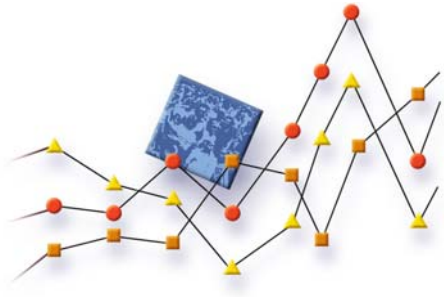
Associate Professor Richard Morgan *(University of Otago)* – Health Impact Assessment at the project level

Ronda Cooper *(Office of the Commissioner for the Environment)* – Treaty of Waitangi audits

Dr Louise Signal (Wellington School of Medicine), **Dr Ruth Richards** (Ministry of Health) – Using the equity lens with DHBs

Kevin Hague *(PHAC),* **Louise Thornley** (PHAC) – The PHAC Health Impact Assessment project

Geoff Fougere *(University of Canterbury)* – The future of Health Impact Assessment



This was the third in a series of Annual Symposia in Health Research and Policy. The symposium was organised by the Centre for Public Health Research (Massey University), and the Public Health Advisory Committee (PHAC), with funding support from PHAC and and Massey University. The presentations and written manuscripts are available in downloadable form on our website. An edited version of the Symposium proceedings is available on the website as a downloadable pdf file, and was also published in hard copy in 2004.

Cancer control

Illott Theatre, Wellington Town Hall, Thursday, 18th November, 2004

Keynote Speakers:

Professor John Potter *(Fred Hutchinson Cancer Research Center, Seattle)* – Cancer prevention: the gap between what we know and what we do

Professor Brian McAvoy *(Australian Cancer Control Initiative)* – Development of cancer control plans in Australia

Other Speakers:

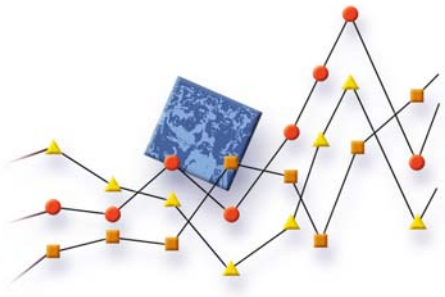
Dr Martin Tobias *(Public Health Intelligence, Ministry of Health)* – Cancer trends and projections

Professor Neil Pearce *(Centre for Public Health Research, Massey University)* – An overview of the causes of cancer in New Zealand

Professor Chris Cunningham *(Research Centre for Māori Health & Development, Massey University)* – Cancer in Māori

Dr Ate Moala *(Centre for Public Health Research, Massey University)* – Cancer in Pacific people

Dr Tony Blakely *(Dept. of Public Health, Wellington School of Medicine)* – Socioeconomic differences in cancer



Dr Mona Jeffreys *(Centre for Public Health Research, Massey University)* – Cancer survival in New Zealand

Carolyn Watts *(New Zealand Cancer Society)* – The role of health promotion in cancer control

Professor Alistair Woodward *(National Screening Advisory Committee)* Screening for cancer: gaps, opportunities and challenges

Dr John Childs *(Auckland District Health Board)* - Cancer treatment in New Zealand:ensuring we facilitate the pathway of patient care

Doug Sexton *(Oncology Service, Christchurch Hospital)* – Support and rehabilitations

Jan Nichols *(St Joseph's Mercy Hospice)* – Palliative care

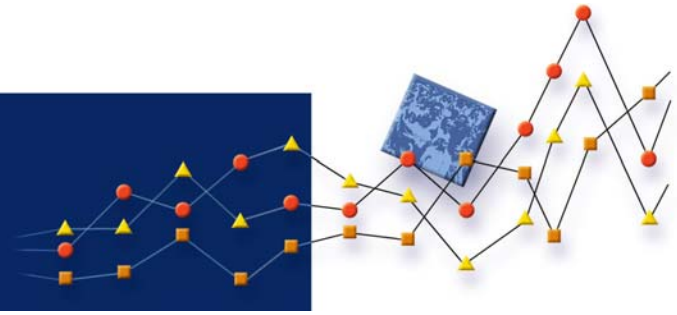
Marjan van Waardenberg *(Ministry of Health)* – The Cancer Control Strategy: process and players

Associate Professor Mihi Ratima and Donna Cormack *(Division of Public Health and Psychosocial Studies, Auckland University of Technology)* – Māori access to cancer services

Associate Professor Chris Atkinson *(Chair, Cancer Control Taskforce)* – The future of cancer control in New Zealand

This was the fourth in a series of Annual Symposia in Health Research and Policy. The symposium was organised by the Centre for Public Health Research (Massey University), and the National Screening Unit (Ministry of Health), with funding support from the Ministry of Health and Massey University. The presentations and written manuscripts are available in downloadable form on our website. An edited version of the Symposium proceedings will be available on the website as a downloadable pdf file, and will also be published in hard copy in 2005.

Presentations



International Agency for Research on Cancer, Lyon, France, February 2004.

McLean D. Mortality and cancer incidence in New Zealand meat workers.

Pearce N. Clues to NHL aetiology from epidemiologic studies of asthma.

University of Sao Paulo, Sao Paulo, Brazil, February 2004.

Pearce N. Epidemiologic studies of asthma in children.

University of Bahia, Salvador, Bahia, Brazil, February 2004.

Pearce N. Why is asthma prevalence increasing?

Department of Epidemiology & Preventive Medicine Monash University, Melbourne, Australia, March 2004.

Pearce N. Why is asthma prevalence increasing?

Ministry of Health, Tonga, March, 2004.

Pearce N. Beta agonists and asthma deaths.

School of Psychology, Massey University, Palmerston North, March 2004.

Pearce N. Epidemiology and public health in the 21st century.

Environmental Sciences and Research (ESR), Kenepuru, May 2004.

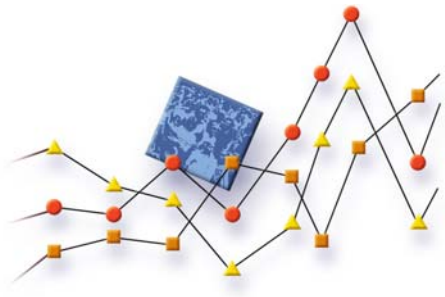
Douwes J. Does endotoxin exposure protect against allergies and asthma?

2nd International Breast Densitometry Workshop, San Francisco, June 2004

Jeffreys M. Body size across the lifecourse and adult mammographic appearance using conventional and novel techniques(SMF): a historical cohort study.

International Conference X2004: Exposure assessment in a changing environment. June 16-18 2004, Utrecht, The Netherlands.

't Mannetje A, Fevotte J, Fletcher T, Brennan P, Boffetta P. Dealing with uncertainty in expert assessment of occupational exposures. Experiences from a multicentre case-control study. *Arbo Wetenschap* 2004;suppl 2;11 (abstract)



't Mannetje A, **McLean D**, **Pearce N**. The development of a job-exposure matrix for New Zealand. *Arbo Wetenschap* 2004;suppl 2;38 (abstract)

Bowman JD, Conover DL, **McLean D**, Nadon L, La Vecchia P, Deltour I, Cardis E. Methods of Assessing Occupational Exposures to Electric and Magnetic Fields for the INTERPHONE Study of Mobile Phones and Cancers of the Head. *Arbo Wetenschap* 2004;suppl 2;9 (abstract)

Royal New Zealand College of General Practitioners Annual Conference, Wellington, July 2004

Moala A, Manu A, Allan-Moeataua A. Knowledge and attitudes towards tuberculosis among Pacific peoples.

van Dalen C, Harding E, Parkin J, Pearce N, Blakey K, Cheng S, Douwes J. Lung function and asthma medication use in a group of Wellington adolescents.

Rising Stars of Health Research, Parliament Building, September 2004

Ellison-Loschmann L. Asthma in Māori

Third Conference on Epidemiological Longitudinal Studies in Europe (CELSE-3), Bristol September 24, 2004

Jeffreys M. Life course weight patterns and adult onset diabetes: the Glasgow Alumni Cohort.

Australian and New Zealand Society for Occupational Medicine Annual Conference, Christchurch, September 2004

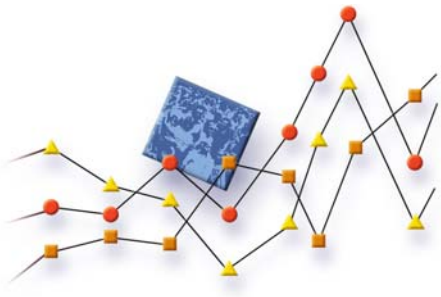
McLean D. Cancer in meat workers.

Massey University School of People, Environment and Planning, Palmerston North, September 2004

Pearce N. The social determinants of asthma.

Australian Society for Microbiology and the Australasian Mycological Society Joint Scientific Meeting, Sydney, Australia, September 2004

Douwes J, Indoor fungi, exposure assessment and non-allergic respiratory disease: progress and prospects.



16th EPICOH Congress on Epidemiology in Occupational health, Melbourne, Australia, October 2004

Douwes J, McLean D, Slater T, Travier N, Cheng S, Pearce N. Occupational asthma in New Zealand pine processing saw mill workers: a case-control study. Occup Environ Med 2004; 61: e34 (abstract).

Douwes J, Pearce N. How useful are induced sputum and exhaled breath condensate methods in epidemiological studies of occupational asthma? Occup Environ Med 2004; 61: e25 (abstract).

Douwes J. Does farming prevent allergies and asthma? Occup Environ Med 2004; 61: e54 (abstract).

't Mannetje A, McLean D, Cheng S, Boffetta P, Colin D, **Pearce N.** Mortality in New Zealand workers exposed to phenoxy herbicides and dioxins. Occup Environ Med 2004; 61: e28 (abstract).

't Mannetje A, McLean D, Pearce N. The New Zealand Job-Exposure-Matrix (NZJEM). Occup Environ Med 2004; 61: e31 (abstract).

't Mannetje A, Pearce N. Quantitative estimates of work-related death, disease and injury in New Zealand. Occup Environ Med 2004; 61: e49 (abstract).

Pearce N, Dryson E, Walls C, 't Mannetje A, McLean D. Surveillance of occupational cancer in New Zealand. Occup Environ Med 2004; 61: e35 (abstract).

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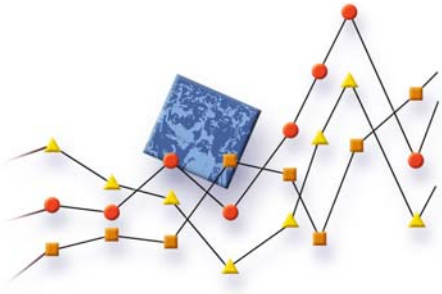
Douwes J, McLean D, Slater T, Travier N, Cheng S, Pearce N. Occupational asthma in New Zealand pine processing saw mill workers. Australasian Epidemiologist 2004; 11.3: 39 (abstract).

Gray M, Ellison-Loschmann L. Factors affecting asthma severity in Māori adolescents. Australasian Epidemiologist 2004; 11.3: 59 (abstract).

Jeffreys M, Stevanovic V, Tobias M, Lewis C, **Ellison-Loschmann L, Pearce N.** Ethnic differences in cancer survival in New Zealand. Australasian Epidemiologist 2004; 11.3: 18 (abstract).

't Mannetje A, McLean D, Cheng S, Boffetta P, Colin D, **Pearce N.** Mortality in New Zealand workers exposed to phenoxy herbicides and dioxins. Australasian Epidemiologist 2004; 11.3: 38-9 (abstract).



Pearce N. Epidemiology in uncertain times.

Van Dalen C, Harding E, Parkin J, Pearce N, Blakey K, Douwes J. Lung function and asthma medication use in a group of Wellington adolescents. Australasian Epidemiologist 2004; 11.3: 20 (abstract).

Paediatric Society of New Zealand Annual Conference, October 2004

Asher MI, Ellwood P, Clayton T, MacKay R, Mitchell E, Moyes C, Pattemore P**,** **Pearce N**, Stewart A, Crane J and the ISAAC New Zealand Phase One and Phase Three Study Groups. Is the prevalence of asthma, allergic rhinoconjunctivitis and atopic eczema symptoms in adolescents and children still increasing in New Zealand?

Beijing International Forum for Epilepsy, Beijing, China, October 2004

D'Souza WJ. The epidemiology of epilepsy: revisited in a representative community-based population in Tasmania, Australia.

Epilepsy Society of Australia Annual Scientific Meeting, Sydney, November 2004

D'Souza WJ, Fryer J, Dwyer T, O'Brien TJ, Ficker DM, Taylor B, **Pearce N**, Cook MJ. The Tasmanian Epilepsy Register: a representative community cohort of treated epilepsy.

Postgraduate Symposium, Tongan Medical Association and International Study of Asthma and Allergies in Childhood (ISAAC), Nuku'alofa, Tonga, November 2004

Foliaki S, Fakakovikaetau T. The Tonga asthma self-management project

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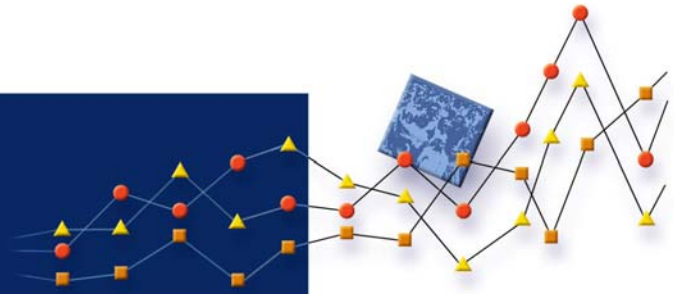


Journals

Cohet C, **Cheng S**, **MacDonald C**, **Baker M**, **Foliaki S**, **Huntington N**, **Douwes J**, **Pearce N**. Infections, medication use, and the prevalence of symptoms of asthma, rhinitis and eczema in childhood. J Epidemiol Comm Health 2004; 58: 852-7.

Douwes J, **Le Gros G**, Gibson P, **Pearce N**. Can bacterial endotoxin reverse atopy and atopic disease? J Allergy Clin Immunol 2004; 114: 1051-4.

Eduard W, **Douwes J**, Omenaas E, Heederik D. Do farming exposures cause or prevent asthma? Results from a study of adult Norwegian farmers. Thorax 2004; 59: 381-6.

Ellison-Loschmann L, King R, **Pearce N**. Regional variations in asthma hospitalisations among Māori and non-Māori. NZ Med J 2004; 117-1188.

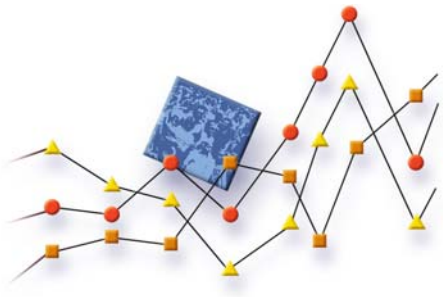
Fishwick D, Bradshaw LM, **Slater T**, Curran AD, **Pearce N**. Respiratory symptoms and lung function change in welders: are they associated with workplace exposures? NZ Med J 2004; 117(1193).

Foliaki S, Kildegaard Nielsen S, Björkstén B, von Mutius E, **Cheng S**, **Pearce N**, and the ISAAC Phase I Study Group. Antibiotic sales and the prevalence of symptoms of asthma, rhinitis and eczema: the International Study of Asthma and Allergies in Childhood (ISAAC). Int J Epidemiol 2004; 33: 558-63.

Graham P, Davis P, Blakely T, Sporle A, **Pearce N**. Compression, expansion or dynamic equilibrium? The evolution of health expectancy in New Zealand. J Epidemiol Comm Health 2004; 58: 659-66.

Jeffreys M, Davey Smith G, Martin RM, Frankel S, Gunnell D. Childhood body mass index and later cancer risk: a 50 year follow up of the Boyd Orr study. Int J Cancer 2004; 112: 348-51.

Jeffreys M, Warren RM, Gunnell D, McCarron P, Davey Smith G. Life course breast cancer risk factors and adult breast density. Cancer Causes and Control 2004; 15: 947-55.



Kaufmann F, and the Post Genome Respiratory Epidemiology Group (Anto J, Baur MP, Bickeboller H, Clayton D, Cookson WOC, Demenais F, Helms PJ, Humphrey-Smith I, Imbeaud S, Knoppers BM, Lathrop M, Little J, **Pearce N**, Schaid D, Silverman E, Weiss S, Wjst M). Post-genome respiratory epidemiology: a multidisciplinary challenge. Eur Respir J 2004; 24: 471-80.

McLean D, **Cheng S**, **'t Mannetje A**, Woodward A, **Pearce N**. Mortality and cancer incidence in New Zealand meat workers. Occup Environ Med 2004; 61: 541-7.

McLean D, **Pearce N**. Cancer among meat industry workers. Scand J Work Environ Health 2004; 30: 425-437.

Pattemore PK, **Ellison-Loschmann L**, Asher MI, Barry DMJ, Clayton TO, Crane J, D'Souza WJ, Ellwood P, Ford RPK, MacKay RJ, Mitchell EA, Moyes C, **Pearce N**, Stewart AW. Asthma prevalence in European, Māori and Pacific children in New Zealand (ISAAC). Paediatric Pulmonol, 2004; 37: 433-42.

Pearce N, **Foliaki S**, Sporle A, Cunningham C. Genetics, race, ethnicity and health. Br Med J 2004; 328: 1070-2.

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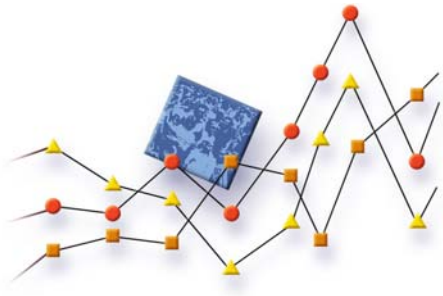
Sharif El N, **Douwes J**, Hoet PHM, Doekes G, Nemery B. Concentrations of domestic mite and pet allergens and endotoxin in Palestine. Allergy 2004; 59: 623-631.

Weiland S, Husing A, Strachan DP, Rzehak P, **Pearce N**, and the ISAAC Phase I Study Group. Climate and the prevalence of symptoms of asthma, allergic rhinoconjunctivitis and atopic eczema in children. Occup Environ Med 2004; 59: 637-8.

Weiland SK, **Pearce N**. Asthma prevalence in adults: good news? Thorax 2004; 59: 637-8.



Conference Proceedings and Book Chapters

Moala A. Impacts on Pacific Health. In: Slater T, Pearce N, Booth M, Ellison-Loschmann L, Jeffreys M, Thornley L, Ward M (eds). Health Impact Assessment. Proceedings of the Third Annual CPHR Symposium in Health Research and Policy. CPHR Occasional Report Series No 7. Wellington: Centre for Public Health Research, 2004 [ISBN 0-476-00933-2; ISSN 1176-1237].

Pearce N, Woodward A. Environmental epidemiology. In: Cameron S, Cromar N, Fallowfield H. Environmental health in Australia and New Zealand. Sydney: Oxford University Press, 2004, pp3-19.

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Pearce N, Greenland S. Confounding and interaction. In: Ahrens W, Krickeberg K, Pigeot I (eds). Handbook of epidemiology. Heidelberg: Springer-Verlag, 2004, 375-401.

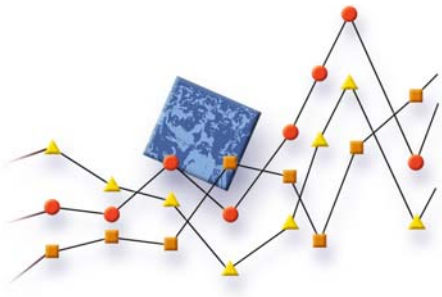
Scelo G, Constantinescu V, Csiki I, Zaridze D, Szeszenia-Dabrowska N, Rudnai P, Lissowska J, Fabianova E, Cassidy A, Slamova A, Foretova L, Janout V, Fevotte J, Fletcher T, **Mannetje A**, Brennan P, Boffetta P. Occupational exposure to vinyl chloride, acrylonitrile and styrene and lung cancer risk (Europe). Cancer Causes Control 2004 15: 445-52.

Books and Reports

Checkoway H, **Pearce N**, Kriebel D. Research methods in occupational epidemiology. 2nd ed. New York: Oxford University Press, 2004 [ISBN 0-19-509242-2].

Driscoll T, **Mannetje A, Dryson E,** Feyer A-M, Gander P, McCracken S, **Pearce N**, Wagstaffe M. The burden of occupational disease and injury in New Zealand: Technical Report. Wellington: NOHSAC, 2004.

Dusseldorp A, Bruggen van M, **Douwes J**, Janssen PJCM, Kelfkens G. Gezondheidkundige advieswaarden binnenmilieu



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Ellison-Loschmann L. Asthma in Māori. CPHR Occasional Report Series No 6.Wellington: CPHR, 2004 [ISBN 4-476-00932-2; ISSN 1176-1237].

Kiro C, Barton R, Tauroa P, Johanson H, **Gray M**, **Ellison-Loschmann L**, **Pearce N,** Kelsall L, Steele J, Hassall I, Belgrave M. Te hauora o nga tamariki o Whaingaroa. CPH Occasional Report Series No 5. Wellington: Centre for Public Health Research, 2004. [ISBN 4-476-00740-2; ISSN 1176-1237].

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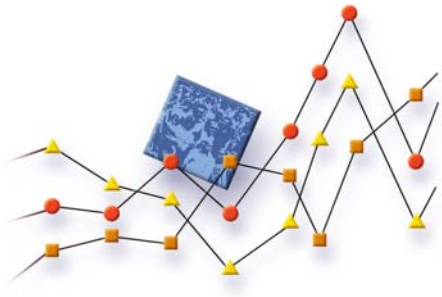
National Health Committee (Logan R, Fougere G, Hague K, Haretuku R, Holloway L, Moore A, Page-Carruth A, **Pearce N**, Stewart L, Sullivan L, Talemaitoga A,Tepania-Palmer G). HIV screening in pregnancy. Wellington: National Health Committee, 2004.

Public Health Advisory Committee (Hague K, Fougere G, Logan R, Stewart L, **Pearce N**, Kiro C). A guide to health impact assessment: a policy tool for New Zealand. Wellington: Public Health Advisory Committee, 2004.

Public Health Advisory Committee (Hague K, Fougere G, Logan R, Kiro C, Haretuku R, Stewart L, **Pearce N**, Moore A). Emerging issues for public health in New Zealand: a discussion paper. Wellington:



Public Health Advisory Committee, 2004.

Public Health Advisory Committee (Hague K, Fougere G, Logan R, Stewart L, **Pearce N**, Kiro C). A guide to health impact assessment: a policy tool for New Zealand. Wellington: Public Health Advisory Committee, 2004.

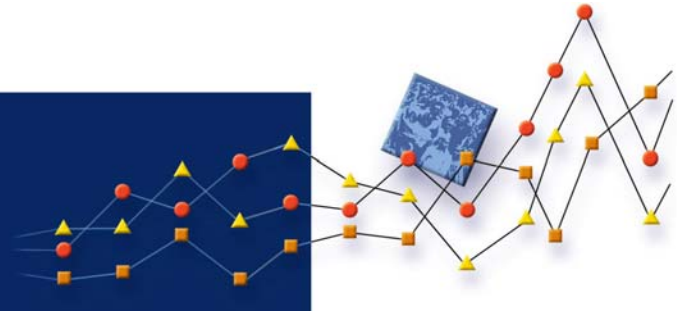
Pearce N, Dryson E, Feyer A-M, Gander P, McCracken S, Wagstaffe M. The burden of occupational disease and injury in New Zealand: Report to the Associate Minister of Labour Wellington: NOHSAC, 2004.

Slater T, Pearce N, Booth M, **Ellison-Loschmann L**, **Jeffreys M**, Thornley L, Ward M (eds). Health Impact Assessment. Proceedings of the Third Annual CPHR Symposium in Health Research and Policy. CPHR Occasional Report Series No 7. Wellington: Centre for Public Health Research, 2004 [ISBN 0-476-00933-2; ISSN 1176-1237].

Other Publications

Pearce N. Who cares about occupational health? PHA Newsletter 2004; 7.4: 4-5.

Seminars



10 February - Jeroen Douwes. Asthma in farmers' children and their parents.

2 March - Sunia Foliaki. Asthma in the Pacific.

8 March - Iain Martin. Upper gastrointestinal cancer in Māori.

29 March - Nancy Krieger. Geocoding and monitoring US socioeconomic inequalities in health: does choice of area-based measure & geographic level matter? The Public Health Disparities Geocoding Project.

31 March - Alex Scott-Samuel. Health inequalities and health politics.

6 April - Rowena Cave. An overview of the development and implementation of evidence-based guidelines.

20 April - Tom Jeavons. The effect of reduction of indoor moulds on asthma outcomes: a pilot Australian study.

27 April - Andrea ’t Mannetje. Dioxin and cancer: A cohort study in New Zealand workers.

25 May - Diana Martin. New Zealand's meningococcal epidemic – the science behind vaccine control.

8 June - Christine van Dalen. Development of biomarkers in asthma.

15 June - Anouk Niesink. The influence of farming on asthma in children: initial results.

20 July - Mona Jeffreys. Ethnic differences in cancer survival in New Zealand.

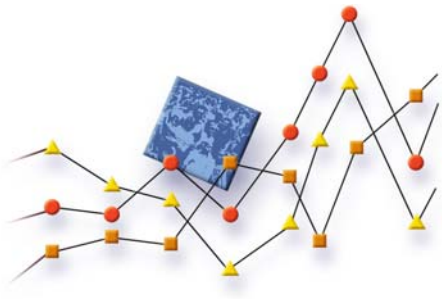
27 July – Jeff Fowles, Rod Lea, David Phillips. Exporing mechanisms to and toxicity of tobacco.

3 August – Neil Pearce. Socio-economic factors, income inequality, social capital and health.

21 September - Debbie Ryan, Karen Blakey. The Pacific Health Chartbook 2004.

7 October - Heather Purnell. Safety implications of work patterns among junior doctors; Nat Marshall. Continuous positive airway pressure reduces sleepiness in mild-moderate obstructive sleep apnea: Meta analysis.

8 October - Harvey Checkoway. Occupational Exposures and Cancer Risks among Women Textile Workers in Shanghai.



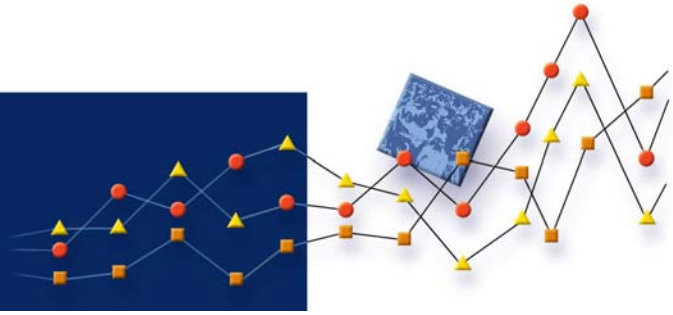
18 October – Hans Kromhout. Quantitative estimation of exposure to welding fumes in an international general population study on asthma.

18 October – Wijnand Eduard. Respiratory diseases and work-related symptoms in Norwegian farmers and associations with bioaerosol exposure.

17 November - Bengt Björkstén. Microbial exposure and infections early in life as modifiers of allergy/asthma development.

23 November - Neil Pearce, Andrea 't Mannetje. The burden of occupational disease and injury in New Zealand.

Advisory Committees



Advisory Board for Healthwise Alumina Workforce Studies. Monash University, Melbourne, Australia (Neil Pearce)

Advisory Board for New Zealand Guidelines Group (Ate Moala, Director)

Advisory Committee for Tasmanian Epilepsy Register (Neil Pearce)

Cancer Control Task Force (Mona Jeffreys)

Cancer Registration Advisory Committee. New Zealand Health Information Service, Ministry of Health (Neil Pearce)

Committee on Guidance for Biological Agents in the Indoor Environment. World Health Organisation (WHO) (Jeroen Douwes).

Consultant Epidemiologist to the New Zealand Cancer Registry (Neil Pearce)

Education and Advocacy Committee. Asthma and Respiratory Foundation of New Zealand (Lis Ellison-Loschmann)

International Study of Asthma and Allergies in Childhood (ISAAC) Executive (Neil Pearce)

International Study of Asthma and Allergies in Childhood (ISAAC) Steering Committee (Neil Pearce, Sunia Foliaki)

Māori Asthma Committee. Asthma and Respiratory Foundation of New Zealand (Lis Ellison-Loschmann)

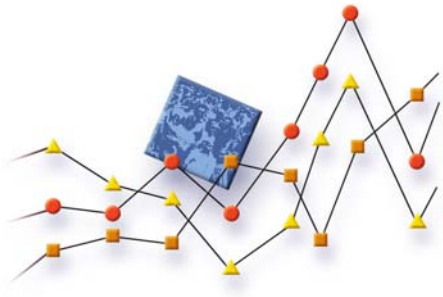
Massey University Human Ethics Committee: Wellington (Lis Ellison-Loschmann, Tania Slater)

Ministerial Advisory Panel on Work-related Gradual Process, Disease, or Infection. Accident Compensation Corporation (ACC) (Neil Pearce)

National Advisory Committee on Health and Disability (National Health Committee). Ministry of Health (Neil Pearce)

National Occupational Health and Safety Advisory Committee (NPHSAC). Occupational Safety and Health (OSH) (Neil Pearce, Chair)

NHI Upgrade Programme Steering Group. Ministry of Health (Neil Pearce).



Organochlorines Technical Advisory Group. Ministry of Health (Andrea ‘t Mannetje, Dave McLean)

OSH Cancer Panel. Occupational Safety and Health (OSH) (Andrea ’t Mannetje, Dave McLean, Neil Pearce)

Pacific Advisory Drafting Group. Massey University (Sunia Foliaki)

Pacific Health Research Committee. Health Research Council (Ate Moala, Neil Pearce).

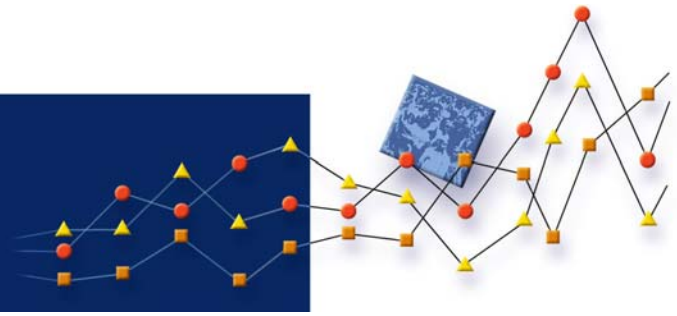
Pasifika Medical Association of New Zealand (Ate Moala, Vice-President)

Research Policy Advisory Committee. Health Research Council (Neil Pearce).

US National Academy of Sciences Working Group on Damp Indoor Spaces and Health (Jeroen Douwes).

Worksafe Advisory Group, Occupational Safety and Health. Occupational Safety and Health (OSH) (Neil Pearce)

International visitors



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