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A 2-year follow-up of 120 Swedish female alcoholics treated early in their drinking career: prediction of drinking outcome.

<https://arctichealth.org/en/permalink/ahliterature10097>

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Source: Alcohol Clin Exp Res. 2001 Nov;25(11):1586-93

Date: Nov-2001

Language: English

Publication Type: Article

Keywords: Adult
Aged
Alcoholism - therapy
Biological Markers
Female
Follow-Up Studies
Humans
Middle Aged
Patient compliance
Patient Dropouts
Recurrence
Regression Analysis
Sweden
Time Factors
Treatment Outcome

Abstract: BACKGROUND: One hundred twenty women alcoholics recruited to a treatment program called EWA (Early Treatment for Women With Alcohol Addiction) were studied. The selected women were not previously treated for alcohol abuse. METHODS: The women were followed up by use of a structured personal interview, biomarkers sensitive for alcohol abuse (i.e., glutamyl transpeptidase), and questionnaires, by using defined criteria for abstinence, social drinking, satisfactory drinking outcome, and unsatisfactory drinking outcome. RESULTS: Drinking outcome was good (i.e., total abstinence, social drinking, or satisfactory drinking outcome) for 67% of the women during the total follow-up time, by use of strict criteria for relapse. The results were corroborated by the biomarkers. Similar results were reported from two previously studied groups of women from the same department. However, the frequency of abstinence was higher and social drinking was significantly lower among this sample of women. Daily drinking, the use of sedatives, and a long duration of pretreatment alcohol abuse predicted an unfavorable outcome. However, a long duration of outpatient treatment predicted a good outcome, whereas treatment dropout was related to an unsatisfactory drinking outcome. A majority of the women (96%) rated the treatment experience and the treatment program favorably. The overall good results might reflect the selection of the subjects studied. CONCLUSIONS: Improving treatment program adherence would probably improve outcome for the women with an unsatisfactory drinking outcome.

PubMed ID: 11707633 [View in PubMed](#) 

The 3 mm skin prick test (SPT) threshold criterion is not reliable for *Tyrophagus putrescentiae*: the re-evaluation of SPT criterion to dust mites.

<https://arctichealth.org/en/permalink/ahliterature71486>

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Source: Allergy. 2002 Dec;57(12):1187-90

Date: Dec-2002

Language: English

Publication Type: Article

Keywords: Adult
Antibody Specificity - immunology
Comparative Study
Croatia
Cross Reactions - immunology
Dermatophagoides farinae - immunology
Dermatophagoides pteronyssinus - immunology
Female
Humans
Immunoglobulin E - blood - immunology
Male
Middle Aged
Proteins - immunology
Pyroglyphidae - immunology
Regression Analysis
Reproducibility of Results
Sensitivity and specificity
Skin Tests - standards
Urban health

Abstract: BACKGROUND: The mean wheal diameter ≥ 3 mm is the usual criterion for positive skin prick test (SPT) reaction to dust mites. The study assessed the accuracy of this SPT criterion with respect to specific IgE values of above 0.35 kUA/l (+ sIgE). METHODS: Specific IgE (ImmunoCAP, Pharmacia AB Diagnostics, Uppsala, Sweden) and standard SPT to *Dermatophagoides pteronyssinus* (DP) and *farinae* (DF), *Lepidoglyphus destructor* (LD) and *Tyrophagus putrescentiae* (TP) (ALK, Hørsholm, Denmark) were performed in a random sample of 457 subjects, of whom 273 men (mean age 35.3 +/- 11.0 years) and 184 women (mean age 37.9 +/- 9.5 years). Statistical analysis was performed using the chi-square test, regression analysis and discriminant analysis. RESULTS: When the mean wheal diameter of ≥ 3 mm was considered positive (+ SPT), the correlation between + SPT and + sIgE was 0.47 for DP (P

PubMed ID: 12464048 [View in PubMed](#) 

[4-year experiences with computer-assisted registration of postoperative wound infections and identification of risk factors].

<https://arctichealth.org/en/permalink/ahliterature226352>

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Source: Ugeskr Laeger. 1991 May 13;153(20):1416-9

Date: May-13-1991

Language: Danish

Publication Type: Article

Keywords: Automatic Data Processing
Denmark - epidemiology
Female
Humans
Male
Registries - statistics & numerical data
Regression Analysis
Risk factors
Surgical Wound Infection - epidemiology - etiology

Abstract: A continuous record of postoperative surgical infections was carried out by electronic data processing of 9,181 orthopaedic and general operations. The overall infection rate was 5.7%, ranging from 2.0% (clean wounds) to 22.1% (dirty wounds). The corresponding deep infection rates were 1.7%, 0.4% and 5.4%, respectively. Employing a multiple logistic regression analysis, ten risk factors were evaluated. Factors found to be significant for both departments were: wound contamination, duration of operation and age. In addition, in the department of orthopaedic surgery: date of operation and surgeon, and in the department of general surgery: planning of operation, length of preoperative stay and anatomic groups. Sex had no influence on postoperative infection. Significant factors altered during the four years. Postoperative stay was, on an average, 13.9 days longer in infected patients.

PubMed ID: 2028549 [View in PubMed](#) 

The 6 kHz acoustic dip in school-aged children in Finland.

<https://arctichealth.org/en/permalink/ahliterature216259>

Author: J. Haapaniemi
Author Affiliation: Department of Otolaryngology, University Central Hospital of Turku, Finland.
Source: Eur Arch Otorhinolaryngol. 1995;252(7):391-4
Date: 1995
Language: English
Publication Type: Article
Keywords:

Adolescent
Age Factors
Audiometry, Pure-Tone
Auditory Threshold
Birth weight
Child
Female
Finland - epidemiology
Hearing Loss, High-Frequency - epidemiology
Hearing Loss, Sensorineural - epidemiology
Humans
Logistic Models
Male
Measles - epidemiology
Prevalence
Regression Analysis
Risk factors
Sex Factors
Socioeconomic Factors

Abstract: In the present study, pure-tone audiometry was used in 687 Finnish school children, aged 6-15 years, to determine the prevalence of a 6 kHz acoustic dip and related factors among three age groups. Trained audiometricians tested air conduction thresholds in a sound-proof room. A total of 57 children (8.3%) had a clear-cut dip of at least 20 dB at 6 kHz. This dip was more pronounced in older children and in boys. A thorough case history was obtained by questionnaire, with logistic regression analysis showing that low birth weight (

PubMed ID: 8562032 [View in PubMed](#) 

10 year follow up study of mortality among users of hostels for homeless people in Copenhagen.

<https://arctichealth.org/en/permalink/ahliterature9689>

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Source: BMJ. 2003 Jul 12;327(7406):81
Date: Jul-12-2003

Language: English
Publication Type: Article
Keywords: Adolescent
Adult
Age Distribution
Aged
Aged, 80 and over
Cause of Death
Denmark - epidemiology
Female
Follow-Up Studies
Homeless Persons - statistics & numerical data
Humans
Male
Middle Aged
Mortality - trends
Registries
Regression Analysis
Research Support, Non-U.S. Gov't
Risk factors
Sex Distribution

Abstract: OBJECTIVES: To investigate mortality among users of hostels for homeless people in Copenhagen, and to identify predictors of death such as conditions during upbringing, mental illness, and misuse of alcohol and drugs. DESIGN: Register based follow up study. SETTING: Two hostels for homeless people in Copenhagen, Denmark PARTICIPANTS: 579 people who stayed in one hostel in Copenhagen in 1991, and a representative sample of 185 people who stayed in the original hostel and one other in Copenhagen. MAIN OUTCOME MEASURE: Cause specific mortality. RESULTS: The age and sex standardised mortality ratio for both sexes was 3.8 (95% confidence interval 3.5 to 4.1); 2.8 (2.6 to 3.1) for men and 5.6 (4.3 to 6.9) for women. The age and sex standardised mortality ratio for suicide for both sexes was 6.0 (3.9 to 8.1), for death from natural causes 2.6 (2.3 to 2.9), for unintentional injuries 14.6 (11.4 to 17.8), and for unknown cause of death 62.9 (52.7 to 73.2). Mortality was comparatively higher in the younger age groups. It was also significantly higher among homeless people who had stayed in a hostel more than once and stayed fewer than 11 days, compared with the rest of the study group. Risk factors for early death were premature death of the father and misuse of alcohol and sedatives. CONCLUSION: Homeless people staying in hostels, particularly young women, are more likely to die early than the general population. Other predictors of early death include adverse experiences in childhood, such as death of the father, and misuse of alcohol and sedatives.

PubMed ID: 12855527 [View in PubMed](#) 

[\[10-year follow-up study of mortality among users of hostels for homeless people in Copenhagen\].](#)

<https://arctichealth.org/en/permalink/ahliterature179879>

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Source: Ugeskr Laeger. 2004 Apr 26;166(18):1679-81

Date: Apr-26-2004

Language: Danish

Publication Type: Article

Keywords: Adolescent
Adult
Age Distribution
Aged
Aged, 80 and over
Cause of Death
Denmark - epidemiology
Female
Follow-Up Studies
Homeless Persons - statistics & numerical data
Humans
Male
Middle Aged
Mortality - trends
Registries
Regression Analysis
Risk factors
Sex Distribution

PubMed ID: 15174407 [View in PubMed](#) 

[A 10-year prospective study of tobacco smoking and periodontal health.](#)

<https://arctichealth.org/en/permalink/ahliterature67464>

Author: J. Bergström
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Source: J Periodontol. 2000 Aug;71(8):1338-47

Date: Aug-2000

Language: English

Publication Type: Article

Keywords: Adult
Age Factors
Aged
Alveolar Bone Loss - epidemiology
Analysis of Variance
Cohort Studies
Comparative Study
Dental Plaque Index
Female
Follow-Up Studies
Gingival Hemorrhage - epidemiology
Humans
Linear Models
Longitudinal Studies
Male
Middle Aged
Music
Observer Variation
Oral Hygiene
Periodontal Diseases - epidemiology
Periodontal Pocket - epidemiology
Population Surveillance
Prospective Studies
Regression Analysis
Smoking - epidemiology
Smoking Cessation - statistics & numerical data
Sweden - epidemiology

Abstract: BACKGROUND: To date only a few studies have evaluated the long-term influence of smoking and smoking cessation on periodontal health. The present study, therefore, was undertaken with the aim to prospectively investigate the influence of smoking exposure over time on the periodontal health condition in a targeted population before and after a follow-up interval of 10 years. METHODS: The primary study base consisted of a population of occupational musicians that was investigated the first time in 1982 and scheduled for reinvestigation in 1992 and 2002. The 1992 investigation included 101 individuals from the baseline study constituting a prospective cohort including 16 smokers, who had continued to smoke throughout the entire length of the 10-year period; 28 former smokers who had ceased smoking an average of approximately 9 years before the commencement of the baseline study; 40 non-smokers, who denied ever having smoked tobacco; and 17 individuals whose smoking pattern changed or for whom incomplete data were available. The clinical and radiographic variables used for the assessment of the periodontal health condition of the individual were frequency of periodontally diseased sites (probing depth > or =4 mm), gingival bleeding (%), and periodontal bone height (%). The oral hygiene standard was evaluated by means of a standard plaque index. RESULTS: The changes over the 10 years with respect to frequency of diseased sites indicated an increased frequency in continuous smokers versus decreased frequencies in former smokers and non-smokers. Controlling for age and frequency of diseased sites at baseline, the 10-year change was significantly associated with smoking (P

PubMed ID: 10972650 [View in PubMed](#) 

10-year trends of educational differences in long sickness absence due to mental disorders.

<https://arctichealth.org/en/permalink/ahliterature285500>

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Source: J Occup Health. 2017 Jul 27;59(4):352-355

Date: Jul-27-2017

Language: English

Publication Type: Article

Keywords: Absenteeism
Adolescent
Adult
Age Distribution
Cross-Sectional Studies
Education - classification - statistics & numerical data
Employment - psychology - statistics & numerical data
Female
Finland
Humans
Male
Mental Disorders - psychology
Middle Aged
Regression Analysis
Sex Distribution
Sick Leave - statistics & numerical data
Young Adult

Abstract: Mental disorders are a key cause of sickness absence (SA) and challenge prolonging working careers. Thus, evidence on the development of SA trends is needed. In this study, educational differences in long SAs due to mental disorders were examined in two age groups among employees of the City of Helsinki from 2004 to 2013. All permanently and temporarily employed staff aged 18-34 and 35-49 were included in the analyses (n~27800 per year). SA spells of ≥14 days due to mental disorders were examined annually. Education was classified to higher and lower levels. Joinpoint regression was used to identify major turning points in SA trends. Joinpoint regression models showed that lower educated groups had more long SAs spells due to mental disorders than those groups with higher education. SA trends decreased during the study period in all studied age and educational groups. Lower educated age groups had similar SA trends. Younger employees with higher education had the fewest SAs. A clear educational gradient was found in long SAs due to mental disorders during the study period. SA trends decreased from 2004 to 2013.

Notes: Cites: PLoS One. 2014 Jun 25;9(6):e9986924963812
Cites: J Occup Health. 2015;57(5):474-8126228519
Cites: Gesundheitswesen. 2015 Apr;77(4):e70-625756925
Cites: Scand J Work Environ Health. 2014 Jul;40(4):353-6024352164
Cites: Scand J Public Health Suppl. 2004;63:152-8015513656
Cites: BMJ Open. 2016 May 06;6(5):e00855027154473
Cites: Occup Med (Lond). 2012 Jul;62(5):379-8122638644
Cites: PLoS One. 2014 Dec 22;9(12):e11588525531900
Cites: Stat Med. 2000 Feb 15;19(3):335-5110649300
Cites: BJPsych Open. 2016 Jan 13;2(1):18-2427703749
Cites: Acta Psychiatr Scand. 2013 Apr;127(4):287-9722775341
Cites: Eur J Public Health. 2009 Dec;19(6):625-3019581376
Cites: BMC Public Health. 2010 Jul 20;10:42620646271
Cites: Int J Epidemiol. 2013 Jun;42(3):722-3022467288
Cites: Eur J Public Health. 2010 Jun;20(3):276-8019843600
Cites: J Occup Environ Med. 2017 Jan;59(1):114-11928045805

PubMed ID: 28496028 [View in PubMed](#) 

30-year mortality after venous thromboembolism: a population-based cohort study.

<https://arctichealth.org/en/permalink/ahliterature257922>

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Source: Circulation. 2014 Sep 2;130(10):829-36

Date: Sep-2-2014

Language: English

Publication Type: Article

Keywords: Aged
Aged, 80 and over
Cohort Studies
Databases as Topic - statistics & numerical data
Denmark - epidemiology
Female
Humans
Longitudinal Studies
Male
Middle Aged
Regression Analysis
Retrospective Studies
Risk factors
Survival Rate
Venous Thromboembolism - epidemiology - mortality

Abstract: Studies on long-term mortality after venous thromboembolism (VTE) are sparse. Using Danish medical databases, we conducted a 30-year nationwide population-based cohort study of 128 223 patients with first-time VTE (1980-2011) and a comparison cohort of 640 760 people from the general population (without VTE) randomly matched by sex, year of birth, and calendar period. The mortality risks for patients with deep venous thrombosis (DVT) and pulmonary embolism (PE) were markedly higher than for the comparison cohort during the first year, especially within the first 30 days (3.0% and 31% versus 0.4%). Using Cox regression, we assessed mortality rate ratios (MRRs) with 95% confidence intervals (CIs). The overall 30-year MRR was 1.55 (95% CI, 1.53-1.57) for DVT and 2.77 (95% CI, 2.74-2.81) for PE. The 30-day MRR was 5.38 (95% CI, 5.00-5.80) for DVT and 80.87 (95% CI, 76.02-86.02) for PE. Over time, the 30-day MRR was consistently 5- to 6-fold increased for DVT, whereas it improved for PE from 138 (95% CI, 125-153) in 1980 to 1989 to 36.08 (95% CI, 32.65-39.87) in 2000 to 2011. The 1- to 10-year and 11- to 30-year MRRs remained 25% to 40% increased after both DVT and PE but were 3- to 5-fold increased after DVT and 6- to 11-fold increased after PE when VTE was considered the immediate cause of death. Patients with VTE are at increased risk of dying, especially within the first year after diagnosis, but also during the entire 30 years of follow-up, with VTE as an important cause of death. Although 30-day mortality after DVT remained fairly constant over the last 3 decades, it improved markedly for PE.

Notes: Comment In: Nat Rev Cardiol. 2014 Sep;11(9):49625027484
Comment In: Nat Rev Cardiol. 2014 Sep;11(9):49725027486

PubMed ID: 24970783 [View in PubMed](#) 

1913 men study - a longitudinal study of the development of stroke in a population.

<https://arctichealth.org/en/permalink/ahliterature250389>

Author: R. Adolfsson
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Source: Scand J Soc Med Suppl. 1977;14:122-7

Date: 1977

Language: English

Publication Type: Article

Keywords: Adult
Aged
Blood pressure
Blood Sedimentation
Cerebrovascular Disorders - epidemiology - etiology
Cholesterol - blood
Finland
Humans
Longitudinal Studies
Male
Middle Aged
Regression Analysis
Risk
Smoking

Abstract: Risk factors for the development of stroke was studied in a prospective long-term investigation of 855 male in a random population sampled of the same age. After 13 years of follow-up 25 participants had suffered from stroke, which gives an incidence of 19/10,000 annually. At the 1963 year investigation several parametras were studied. The stroke-prone person had higher values of systolic and diastolic blood pressure and had a significant greater total heart volume. Blood parametras as the fasting of serum cholesterole, triglyceride and erythrocyte sedimentation rate were significantly elevated in those who developed stroke. They also tended to consume more coffee and showed a higher tobacco consumption. By applying the multiple regression model it was disclosed that the most preductive risk-variables were diastolic blood pressure, erythrocyte sedimentation rate and smoking habits.

PubMed ID: 298994 [View in PubMed](#) 