



# ARCTIC HEALTH

*An information portal to issues affecting the health and well-being  
of our planet's northernmost inhabitants*

## 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>

Author: B. Haver  
L. Dahlgren  
A. Willander

Author Affiliation: Karolinska Institute, Department of Clinical Neuroscience, Clinical Alcohol and Drug Research Section, Stockholm, Sweden. [brit.haver@psyk.uib.no](mailto:brit.haver@psyk.uib.no)

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>

Author: B. Kanceljak-Macan  
J. Macan  
D. Plavec  
T. Klepac  
S. Milkovic-Kraus

Author Affiliation: Institute for Medical Research and Occupational Health, Zagreb, Croatia.

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  $\geq 3$  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  $\geq 3$  mm was considered positive (+ SPT), the correlation between + SPT and + sIgE was 0.47 for DP (P

PubMed ID: 12464048 [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>

Author: Merete Nordentoft  
Nina Wandall-Holm  
Author Affiliation: Department of Psychiatry, Bispebjerg Hospital, Bispebjerg Bakke 23, 2400 Copenhagen NV, Denmark.  
merete.nordentoft@dadlnet.dk  
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](#) 

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

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

Author: J. Bergström  
S. Eliasson  
J. Dock

Author Affiliation: Department of Periodontology, Karolinska Institutet, Stockholm, Sweden.

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>

Author: Hilla Sumanen  
Olli Pietiläinen  
Eero Lahelma  
Ossi Rahkonen

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>

Author: Kirstine Kobberø Søgaard  
Morten Schmidt  
Lars Pedersen  
Erzsébet Horváth-Puhó  
Henrik Toft Sørensen

Author Affiliation: From the Department of Clinical Epidemiology, Aarhus University Hospital, Aarhus, Denmark. [kks@clin.au.dk](mailto:kks@clin.au.dk).

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  
K. Svärdsudd  
G. Tibblin

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](#) 

## Abdominal massage for people with constipation: a cost utility analysis.

<https://arctichealth.org/en/permalink/ahliterature142788>

Author: Kristina Lämås  
Lars Lindholm  
Birgitta Engström  
Catrine Jacobsson

Author Affiliation: Department of Nursing, Umeå University, Sweden. kristina.lamas@nurs.umu.se

Source: J Adv Nurs. 2010 Aug;66(8):1719-29

Date: Aug-2010

Language: English  
Publication Type: Article  
Keywords: Abdomen  
Adult  
Aged  
Aged, 80 and over  
Constipation - economics - physiopathology - therapy  
Cost-Benefit Analysis  
Female  
Humans  
Laxatives - economics - therapeutic use  
Male  
Massage - economics - nursing  
Middle Aged  
Patient Dropouts  
Patient Education as Topic  
Prospective Studies  
Quality of Life  
Regression Analysis  
Self Care - economics  
Sweden

**Abstract:** This paper is a report of a study conducted to evaluate change in health-related quality of life for people with constipation receiving abdominal massage and to estimate the cost-effectiveness of two alternative scenarios developed from the original trial.

Constipation is a common problem and is associated with decrease in quality of life. Abdominal massage appears to decrease the severity of gastrointestinal symptoms, but its impact on health-related quality of life has not been assessed.

A randomized controlled trial including 60 participants was conducted in Sweden between 2005 and 2007. The control group continued using laxatives as before and the intervention group received additional abdominal massage. Health-related quality of life was assessed using the EQ-5D and analyzed with linear regression. Two scenarios were outlined to conduct a cost utility analysis. In the self-massage scenario patients learned to give self-massage, and in the professional massage scenario patients in hospital received abdominal massage from an Enrolled Nurse.

Linear regression analysis showed that health-related quality of life was statistically significantly increased after 8 weeks of abdominal massage. About 40% were estimated to receive good effect. For 'self-massage', the cost per quality adjusted life year was euro75,000 for the first 16 weeks. For every additional week of abdominal massage, the average dropped and eventually approached euro8300. For 'professional massage', the cost per quality adjusted life year was euro60,000 and eventually dropped to euro28,000.

Abdominal massage may be cost-effective in the long-term and it is relevant to consider it when managing constipation. A crucial aspect will be to identify those who will benefit.

PubMed ID: 20557387 [View in PubMed](#) 

[Abide with me: religious group identification among older adults promotes health and well-being by maintaining multiple group memberships.](https://arctichealth.org/en/permalink/ahliterature113579)

<https://arctichealth.org/en/permalink/ahliterature113579>

Author: Renate Ysseldyk  
S Alexander Haslam  
Catherine Haslam

Author Affiliation: School of Psychology, University of Exeter, Exeter, United Kingdom. r.ysseldyk@uq.edu.au

Source: Aging Ment Health. 2013;17(7):869-79

Date: 2013

Language: English

Publication Type: Article

Keywords: Aged  
Aged, 80 and over  
Canada  
Data Collection  
Depression - psychology  
Female  
Great Britain  
Humans  
Male  
Mental Health - statistics & numerical data  
Middle Aged  
Regression Analysis  
Religion and Psychology  
Residential Facilities  
Social Identification  
Social Support

Abstract: Aging is associated with deterioration in health and well-being, but previous research suggests that this can be attenuated by maintaining group memberships and the valued social identities associated with them. In this regard, religious identification may be especially beneficial in helping individuals withstand the challenges of aging, partly because religious identity serves as a basis for a wider social network of other group memberships. This paper aims to examine relationships between religion (identification and group membership) and well-being among older adults. The contribution of having and maintaining multiple group memberships in mediating these relationships is assessed, and also compared to patterns associated with other group memberships (social and exercise).

Study 1 (N = 42) surveyed older adults living in residential care homes in Canada, who completed measures of religious identity, other group memberships, and depression. Study 2 (N = 7021) longitudinally assessed older adults in the UK on similar measures, but with the addition of perceived physical health.

In Study 1, religious identification was associated with fewer depressive symptoms, and membership in multiple groups mediated that relationship. However, no relationships between social or exercise groups and mental health were evident. Study 2 replicated these patterns, but additionally, maintaining multiple group memberships over time partially mediated the relationship between religious group membership and physical health.

Together these findings suggest that religious social networks are an especially valuable source of social capital among older adults, supporting well-being directly and by promoting additional group memberships (including those that are non-religious).

PubMed ID: 23711247 [View in PubMed](#) 