

ISPM News Archive 2012

11.12.2012 09:14

Zentrale Rolle des Schweizer Kinderkrebsregisters im Vorentwurf des Krebsregistrierungsgesetzes

Am 7. Dezember erfolgte die Eröffnung der Vernehmlassung zum Bundesgesetz über die Registrierung von Krebskrankheiten. Der Vorentwurf baut auf bestehenden erfolgreichen Strukturen auf: Krebserkrankungen bei Kindern und Jugendlichen sollen weiterhin zentral im Schweizer Kinderkrebsregister registriert werden, welches unter dem geplanten Gesetz finanzielle Unterstützung durch Bund und Kantone erhält.



In den bald 40 Jahren seines Bestehens hat das Schweizer Kinderkrebsregister nationale Daten zu Auftreten, Verlauf und Prognose von Krebserkrankungen bei Kindern und Jugendlichen bereitgestellt, Abklärungen und Therapien standardisiert und stetig verbessert, Heilungsraten eindrücklich erhöht und ein grosses Forschungsprogramm aufgebaut zu Ursachen und Folgen von Krebs im Kindesalter.

Die Vernehmlassung um Vorentwurf des neuen Bundesgesetzes dauert bis am 22. März 2013.

Link zur Homepage des Schweizer Kinderkrebsregisters:

Deutsch <http://www.kinderkrebsregister.ch/>

Französisch <http://www.registretumeursenfants.ch/>

Italienisch <http://www.registrotumoripediatrici.ch/>

Link zu Medienmitteilung und Vernehmlassungsunterlagen des Bundes:

Deutsch <http://www.bag.admin.ch/themen/gesundheitspolitik/10374/index.html?lang=de>

Französisch <http://www.bag.admin.ch/themen/gesundheitspolitik/10374/index.html?lang=fr>

Italienisch <http://www.bag.admin.ch/themen/gesundheitspolitik/10374/index.html?lang=it>

07.12.2012 15:35

We are now on Facebook and Twitter!

We have just released our presence in Facebook and Twitter creating our site where we will keep you informed about our latest news, publications, events, etc.



How do I find ISPM on Facebook?

If you're already set up with a Facebook account, please LIKE us to follow our newsfeed. Our Facebook link is: www.facebook.com/ISPMBern

In case you do not have a Facebook Page, bookmark us and check back on recent releases from time to time.

How do I follow ISPM on Twitter?

If you're wanting to find out about ISPM news updates via Twitter, visit us on www.twitter.com/ISPMBern. All you need to do is follow us by clicking the 'FOLLOW' button.

16.10.2012 10:09

Awards and medals for Mazvita Sengayi

Mazvita Sengayi, a medical doctor from Zimbabwe who recently joined ISPM was one of the best Master students at The University of the Witwatersrand.



Mazvita won both the prestigious Masters Award for course work done at the School of Public Health (supervised by Dr Harry Moultrie) and the William Harding Le Riche Medal of Epidemiology given to the student with the best research report in the field of epidemiology (see [University of the Witwatersrand/Awards](#) for more information on the medal). Mazvita's MSc research was on predictors of loss to follow-up in children receiving antiretroviral treatment in Johannesburg, South Africa . She used the Harriet Shezi cohort data which is part of the International epidemiological Databases to Evaluate AIDS (IeDEA, see www.iedea-sa.org). Mazvita will do a PhD on HIV and cancer at ISPM but continue to be based in Johannesburg at the National Cancer Registry. The picture shows Mazvita (left) with Professor Sarala Naicker, the head of the Department of Internal Medicine.

11.10.2012 11:42

Epidemiology Winter School 2013 in Wengen now open for registration (copy 1)

The Swiss Winter School takes place in January during the week following the International Lauberhorn ski race, when Wengen is calm, with few people on the slopes. Students work hard in the mornings. They then have an extended break to review course materials, catch up on emails or (more likely) go skiing or snowboarding. We reconvene at 5 pm for computer or practical sessions.



We have decided to offer 5 courses in 2013, building on the successes of previous years. All courses will take place during the week of **21-26 January, 2013**. One course will run for 5 days, the others for 3 days each. The list of courses and key faculty is as follows:

- **Advanced survival analysis for cohort studies** (2 ECTS)
Prof. Jonathan Sterne, University of Bristol, 5 days, Mon-Fri
- **Indirect comparisons and network meta-analysis: Evidence synthesis with multiple treatments** (1.5 ECTS)
Dr. Julian Higgins, University of Cambridge, 3 days, Mon-Wed
- **Writing a journal article – and getting it published** (1.5 ECTS)
Prof. Nicola Low, University of Bern, 3 days, Mon-Wed
- **Mathematical modelling in infectious disease epidemiology** (1.5 ECTS)
Prof. Sebastian Bonhoeffer, ETH Zurich, 3 days, Thurs-Sat
- **Causal mediation analysis** (1.5 ECTS)

Prof. Tyler VanderWeele, Harvard University, 3 days, Thurs-Sat

You will be able to book the one-week course or one or two of the 3-day courses. Our website is now open for bookings.

The website of the Swiss Epidemiology Winter School can be found [here](#).

03.10.2012 09:06

Nicole Steck wins prize for best scientific presentation at 2012 Swiss Public Health Conference in Lausanne

Nicole Steck won a prize for her talk on the epidemiology of assisted suicide in Switzerland, which is a project within the Swiss National Cohort study. The Swiss Public Health Conference awards a prize every year for the best scientific abstract submitted to the conference. This year's conference was on August 30th and 31st in Lausanne.



Nicole's project describes the incidence of deaths from suicide that were assisted by 'right-to-die' organisations in Switzerland from 2001-2008 and identified independent determinants of assisted suicide at the level of the individual, household and community. The study uses data from the [Swiss National Cohort study](#), which is funded by the Swiss National Science Foundation. The study started in May 2011 and should have the final results by the end of 2013.

Link to slides:

http://sph12.organizers-congress.ch/downloads/presentations/C1_1_Steck_Nicole_2.pdf

Picture links:

<http://reportages.dominique-bedier.com/image/2076-db02050.html>

05.09.2012 13:18

Exciting Swiss Meeting for Infectious Disease Dynamics

Third Swiss Meeting for Infectious Disease Dynamics (SMIDDY) a success at Rathaus, St. Gallen, 30th August 2012.



The meeting covered a broad range of topics such as hospital health, HIV epidemiology, malaria modelling and animal demography. The interdisciplinary nature of the meeting resulted in fruitful discussion between mathematical epidemiologists, clinicians and biostatisticians.

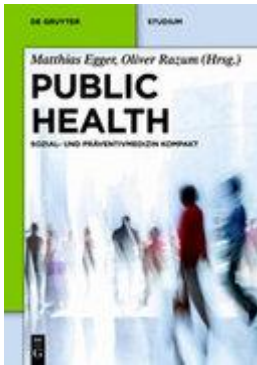
Next year's meeting will be organized by the ETH Zurich and the University Hospital Zurich.

More information on SMIDDY and the presentations of the meeting in St. Gallen can be found on www.smiddy.ch

Photo credit: <http://www.stadt.sg.ch>

Public Health kompakt – ein neues Lehrbuch!

Public Health - Sozial- und Präventivmedizin kompakt bietet Studierenden der Humanmedizin, der verschiedenen Gesundheitsberufen, und Public-Health Studiengängen einen leicht verständlichen Einstieg in die unterschiedlichen Aspekte von Public Health.



Das Buch vermittelt neben den grundlegenden Begriffen und Konzepten des Fachs auch das relevante Basiswissen aus den Bereichen Prävention und Gesundheitsförderung, Epidemiologie und Biostatistik. Weitere wichtige Themen sind der Aufbau von Gesundheitssystemen, die Gesundheitsökonomie, die Gesundheitspolitik und die Public-Health-Ethik. Eine große Rolle spielen auch die Themen Umwelt und Gesundheit, Arbeit und Gesundheit, chronische Krankheiten und Unfälle, Infektionskrankheiten sowie der internationale Aspekt von Public Health.

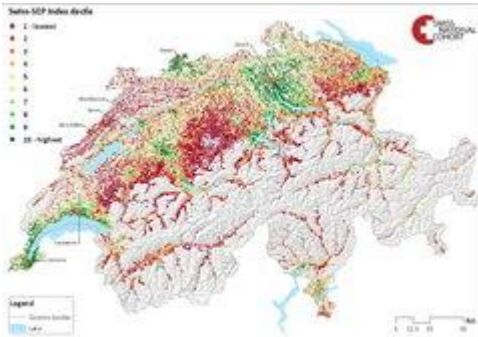
Es war unser Ziel ein kompaktes Lehrbuch für Studierende zu schreiben, das die relevanten Inhalte des Fachs auf relativ engem Raum zusammenträgt. Da es sich bei Public Health um ein breites, multidisziplinäres Fach handelt, war es gar nicht so einfach, sich hier auf das wirklich Wesentliche zu beschränken. Um die Studierenden und LeserInnen des Lehrbuchs trotzdem mit vielen wichtigen Zusatzinformationen zu versorgen, haben wir eine Homepage zum Buch aufgebaut:

www.public-health-kompakt.ch

Hier finden Sie die Literaturquellen, auf denen die Texte unseres Lehrbuchs basieren, Hinweise auf zu empfehlende Vertiefungsliteratur, zusätzliche Abbildungen, Tabellen und Boxen, zusätzliche Formeln und Übungen, Audio- und Video-Materialien und zahlreiche aktuelle Internetquellen zum jeweiligen Thema.

An area-based index of socio-economic position for Switzerland

ISPM researchers together with colleagues from FORS Lausanne and University of Bristol developed and validated "Swiss-SEP", an area-based index of socio-economic position.



Area-based indices of socioeconomic position (SEP) are useful to substitute missing individual-level data in epidemiological studies or to study neighbourhood effects on health over and above individual-level SEP, but suitable indices have been lacking for Switzerland. A group of ISPM researchers now filled this gap in collaboration with colleagues from the Swiss Centre of Expertise in the Social Sciences (FORS) in Lausanne and the University of Bristol. The Swiss neighbourhood index of SEP (Swiss-SEP) was published this week in the *Journal of Epidemiology and Community Health*.

The index was developed using geo-referenced census 2000 and road network data to define "ego-centred" neighbourhoods of 50 households around residential buildings, with sliding boundaries. The socioeconomic standing of these neighbourhoods was assessed based on median rent, education and occupation of household heads and household crowding. The neighbourhoods of higher SEP (green) were mainly found in the urban agglomerations (Zurich, Geneva, Basel, Lausanne, Bern) and along the lakes, for example Lake Geneva and Lake Zurich. Neighbourhoods of lower SEP (red) dominate the peri-urban and rural regions immediately north of the Alps which are free of major lakes, the area north of the lakes of Neuchâtel and Bienne and much of the valleys of the Alps (see map).

The Swiss-SEP was strongly associated with independent data on household income from the Swiss Household Panel. Finally, a lower index was associated with higher mortality from all-causes and more strongly with causes associated with socioeconomically patterned behaviours, such as smoking or diet. For example, the index was strongly associated with lung cancer and cardiovascular mortality. Conversely, suicide was somewhat more common in areas of higher SEP.

Link to paper, see http://jech.bmj.com/content/early/2012/06/19/jech-2011-200699.short?g=w_jech_ahead_tab

For access to Swiss-SEP data, see <http://www.swissnationalcohort.ch/index.php?id=3372>

19.06.2012 14:20

Swiss Meeting for Infectious Disease Dynamics 2012

The "Swiss Meeting for Infectious Disease Dynamics" (SMIDDY) will take place Thursday, 30th of August 2012, in St. Gallen.



The one-day meeting focuses on the field of mathematical, computational and statistical modeling of infectious disease dynamics. Topics include within-host and between-host dynamics of infectious diseases in both humans and animals.

The aim of the meeting is to bring together researchers from different fields within Switzerland, ranging from fundamental research to public health policy making. Several research groups will have the opportunity to present their work in a dedicated forum, learn about other projects and foster future collaborations.

There is no registration fee. Abstracts can be submitted until July 15 and registration is open until August 23.

More information can be found on www.smiddy.ch

Photo credit: upload.wikimedia.org

Viscosupplementation for Osteoarthritis of the Knee

ISPM researchers have found that the use of viscosupplementation, the intra-articular injection of hyaluronic acid, does not result in a clinically relevant benefit, but is associated with an increased risk for serious adverse events.



Osteoarthritis is the most common form of joint disease and the leading cause of pain and physical disability in older people. Viscosupplementation has been used for decades to reduce pain and increase physical function. However, published trials showed conflicting results.

The musculoskeletal research group at ISPM Bern summarized the benefits and risks of viscosupplementation and published their results in *Annals of Internal Medicine*. They found 89 trials in 12 667 patients suffering from knee osteoarthritis. Large studies of high quality did not suggest that viscosupplementation had a clinically relevant effect on pain or function. However, the authors found an increased risk of adverse events associated with viscosupplementation, including flare-ups and effusions, and serious adverse events.

Based on these findings, the authors discourage the use of viscosupplementation for knee osteoarthritis.

Links:

- [Annals of Internal Medicine](#)
- Funding: [Arco Foundation](#)

Excellent quality of life after childhood leukaemia in Switzerland

Young adults, who have survived childhood leukaemia, report quality of life that is as good as the general population, even after a relapse. This study is part of the nationwide Swiss Childhood Cancer Survivor Study.



Little is known about the quality of life in survivors of acute lymphoblastic leukaemia (ALL) who have relapsed. ALL is the most common cancer in children. While most children can be cured, about 20% have a relapse. These children need intensified treatments, including chemotherapy, brain irradiation or stem cell transplantation. The disease and its treatment put ALL survivors at risk of later health problems, such as cardiac disease or learning difficulties, particularly those who have relapsed.

In a nationwide cohort study in Switzerland, we investigated quality of life in all survivors of childhood ALL and compared them to the general population. We focused on those who had suffered a relapse.

Data came from the Swiss Childhood Cancer Survivor Study, a follow-up study of all childhood cancer patients registered in the Swiss Childhood Cancer Registry. Survivors rated their quality of life with the widely used "Short Form-36" questionnaire, which measures four aspects of physical health and four aspects of mental health.

The 457 survivors in this study had similar quality of life compared to healthy peers, irrespective of relapse status. Compared to non-relapsed ALL survivors, relapsed ALL survivors reported slightly lower quality of life in one of eight aspects ("general health").

In conclusion, we found that survivors generally report an excellent quality of life. In those, who have a relapse, further improvements in therapy should aim to optimize quality of life as well as minimize late effects.

Link to the article: <http://dx.plos.org/10.1371/journal.pone.0038015>

Link to the childhood cancer registry: <http://www.childhoodcancerregistry.ch>

Photo credit:

CC BY-SA Frédéric de Villamil <http://www.flickr.com/photos/fdevillamil/3564278538/>

02.03.2012 08:00

Should asthmatic mothers nurse their babies?

Research published today by ISPM's Child and Adolescent Health Group examines the effects of breastfeeding on lung development.



Prolonged breastfeeding has numerous advantages for infants, mothers and society. The impact of breastfeeding on respiratory health, however, is less clear. While a protective effect against respiratory infections is not disputed, the evidence on breastfeeding and later lung function in the offspring is unclear, especially if the mothers suffer from asthma.

ISPM Bern and University of Leicester analyzed the relationship between breastfeeding and lung function in a sample of 1458 children from the Leicestershire Cohort Studies. Duration of breastfeeding, other exposures and respiratory symptoms were assessed by repeated questionnaires and lung function tests were performed at age 12 years.

The study found that non-breastfed children whose mothers suffered from asthma had lower lung volumes compared to non-breastfed kids of non-asthmatic mothers. However, lung volumes improved if they were breastfed 4 months or longer, approaching values of children whose mothers had no asthma. In all children (independent of maternal asthma), expiratory flows were better if they had been breastfed for 4 months or more.

This study adds importantly to existing evidence against claims that breastfeeding could be harmful in children of asthmatic mothers. It indicates that children of asthmatic mothers benefit particularly from breastfeeding, with improved lung function. The analysis suggests that, rather than acting via reductions of respiratory infections, or prevention of asthma or allergy, breastfeeding might have a direct effect on lung growth. This should be investigated further. In the meantime, breastfeeding is strongly recommended for all infants, including those whose mothers have asthma.

[Press release of the funding agency, Swiss National Science Foundation.](#)

[The article is available here.](#)

Photo credit:

- <http://www.nh.org.au/breastfeeding-support/w1/i1002378/>

29.02.2012 08:00

The first Professor of Patient Safety in Switzerland

David Schwappach has been promoted to Titular Professor at University of Bern.



David Schwappach studied Economics and Social Sciences in Hamburg, Germany, and completed his postgraduate studies in Public Health at the University Berlin in 1998. He obtained a PhD in Theoretical Medicine in 2001 and was promoted to junior professor at University of Berlin in 2004. He received the Venia Legendi for Public Health in 2006. His research covers a broad range of aspects of patient safety and health services research with patient involvement in safety being an important focus. David is the scientific head of Swiss Patient Safety Foundation (see www.patientensicherheit.ch). He is associated with our Division of Social and Behavioural Health Research, where he is involved in several research projects. Congratulations, Professor Schwappach!

Association of Type D personality and cardiovascular mortality revisited

The prognostic importance of personality in coronary heart disease was overestimated in the earlier studies



People with Type D personality are characterized by a high level of emotional distress and a lack of ability to share their feelings with others. In a recent meta-analysis on the prognostic importance of Type D personality in cardiovascular disease the group of Jürgen Barth, with colleagues from the University of Applied Sciences in Leipzig found that associations became much weaker over time. The first study of 1995 found a fivefold higher odds of death after a cardiac event for Type D (odds ratio 5.02). However, the odds ratio declined over time to 1.54 when all 12 studies were analyzed. Furthermore, Barth and colleagues found that there was an association only with coronary heart disease but not with heart failure. These findings mirror the data on Type A behavior (high competitiveness and stress). Early studies found a very high risk for Type A persons to develop coronary heart disease, but later work with better adjustments for confounders failed to replicate these findings.

You can follow the scientific controversy about the value of Type D [here](#).

Link:

- <http://www.springerlink.com/content/g12418t453762170/>

25.01.2012 12:02

Continuity and change at the IJPH

Thomas Abel steps down as Editor-in-Chief but the editorial office remains at ISPM.



Thomas Abel played a crucial role in shaping the scope and focus of International Journal of Public Health (IJPH). During his 10 years of leadership the journal gained much visibility, with the impact factor reaching 2.24 in 2010. Thomas Kohlmann, Co-Editor-in-Chief since 2007 will carry on, and two new Editors-in-Chief have been appointed from the group of senior editors: Nino Künzli and Andrea Madarasova Geckova. Nino is the Deputy Director of the Swiss Tropical and Public Health Institute (SwissTPH) in Basel. Andrea is a vice-director of the Institute for Society and Health, Pavel Jozef Safarik University in Kosice, Slovakia. The new team will continue to stimulate international debate, across cultures, regions, nations, and health systems.

The Editorial Office of the Journal will remain at ISPM, with Thomy Tonia, Blog Editor and Anke Berger, Managing Editor.

Links:

- <http://www.springer.com/public+health/journal/38>
- <http://blogs.springer.com/ijph/>
- <http://kosice.upjs.sk/~geckova/index.html>
- http://www.swisstph.ch/no_cache/about-us/staff/detail-single-all/staff/71/nino-kuenzli/k%C3%BCnzli.html
- <http://www.medizin.uni-greifswald.de/icm/index.php?id=29>

05.01.2012 12:07

MADE | Are you ready to advance?

One year of advanced studies for students with an MSc degree in medicine or one of the biomedical sciences.



There is growing recognition of the fundamental importance of epidemiology to high-level clinical research worldwide. Epidemiology has made an enormous contribution to evidence-based medicine. It is fundamental to diagnosis, prognosis and prediction, and treatment. It is important for evaluating strategies for screening, the value of new prognostic indicators, and the efficacy and effectiveness of therapeutic interventions.

Successful students are awarded with a fully recognized Joint Degree. The Masters' programme provides an excellent preparation for a PhD research project. MADE alumni will be able to fully integrate clinical and genetic aspects of epidemiology in their clinical work as well as in their research. They will start – or continue – their professional career as a scientist, perhaps combined with a clinical career, or in a pharmaceutical, food or medical appliance company, at a ministry of health, university, university hospital, research institute or advisory organisation.

Call for applications:

Eligibility and Admission: The 2012-13 programme starts in August 2012, in conjunction with the Erasmus Summer Programme 2012. Applicants must hold a master's degree in medicine, biology, biochemistry, pharmacy, nutrition, health sciences or allied sciences. In view of housing arrangements and visa applications, online applications for the 2012-13 programme must be submitted by March 31, 2012. Online applications are welcome as of mid-January 2012. Please complete Keep me posted on MADE on the website or send us an e-mail at [made-masters\[at\]erasmusmc.nl](mailto:made-masters[at]erasmusmc.nl)

We look forward to hearing from you!

Weblink: [MADE](#) / Download [PDF](#)

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