

were assessed by a questionnaire. MD adherence was assessed with the Portuguese version of the Prevention with Mediterranean Diet tool (PREDIMED). The relationships between sociodemographic and lifestyles characteristics and MD adherence were analyzed through logistic regression analysis and univariate ANOVA.

RESULTS: The overall adherence to MD was 15%. Regarding age, only olive oil and pulses are not positively related to compliance with MD recommendations. Men had lower odds of fulfilling the MD criteria related to vegetables (0.59; $p=0.02$), fruits (0.57; $p=0.007$), nuts (0.47; $p=0.002$), and white meat (0.59; $p=0.02$). Concerning education, education level below 3rd cycle is always less likely to meet the DM criteria for nuts ($p<0.005$). Those who practice physical activity are more likely to meet the DM criteria for vegetables (1.50; $p=0.046$), fruits (1.78; $p=0.006$), red meat (1.57; $p=0.007$), sweet beverages (1.64; $p=0.021$), pulses (1.56; $p=0.029$) and nuts (1.66; $p=0.028$). Compliance with the MDP criteria for wine tends to increase with tobacco (3.03; $p=0.006$) and alcohol (5.36; $p<0.001$) consumption. When analyzing the adherence to MD as a whole, stands out, in a descending order, the influence of age, physical activity and sex ($\beta=0.095, 0.026, 0.015, p<0.005$ respectively).

CONCLUSIONS: Less than a sixth of this sample adheres to MD. In these results it stands out the relevance of considering sex, age and physical activity to help planning measures to promote MD adherence.

CO22. ARE EARLY LIFE FACTORS ASSOCIATED WITH THE DEVELOPMENT OF APPETITE IN INFANCY? - A STUDY IN THE BITWIN COHORT

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INTRODUCTION: Appetitive traits seem to play a role in weight gain and growth in infancy. However, it is unclear which environmental factors affect the development of appetite during this period.

OBJECTIVES: To identify early life factors associated with appetitive traits, at 3 and 12 months of age, and its stability.

METHODOLOGY: Participants are from a Portuguese birth cohort (BITwin). Appetitive traits at 3 months were assessed using the Baby Eating Behavior Questionnaire ($n=347$) and at 12 months with the Children's Eating Behavior Questionnaire for toddlers ($n=325$), validated at these ages. Stability was evaluated using correlations. The association of early life factors (weight for gestational age, mode of feeding, prematurity, smoking during pregnancy, maternal pre-pregnancy body mass index (BMI), gestational weight gain, and diabetes mellitus diagnosis) with appetitive traits was estimated by multivariable linear regression models.

RESULTS: Appetitive traits at 3 and 12 months of age were moderately correlated ($r=0.279-0.331$). Associations with early life factors differed by age. Mothers with higher BMI had infants with lower Satiety Responsiveness at 3 months. Excessive gestational weight gain was linked to a more avid appetite at both ages. In contrast, infants small for gestational age showed higher Satiety Responsiveness at 3 months ($\beta=0.241$; 95%CI: 0.056, 0.425) and lower Food Responsiveness (i.e., eating in response to external stimuli) at 12 months ($\beta=-0.297$; 95%CI: -0.523, -0.072). Infants fed exclusively with formula milk showed lower scores on Enjoyment of Food ($\beta=-0.145$; 95%CI: -0.270, -0.019) and Food Responsiveness at 3 months ($\beta=-0.415$; 95%CI: -0.618, -0.212) and, conversely, lower scores on Slowness in Eating at 12 months (i.e., eating faster) ($\beta=-0.252$; 95%CI: -0.451, -0.054).

CONCLUSIONS: Appetitive traits showed moderate stability, suggesting that early life factors may contribute to the development of appetite in infancy. Factors associated with these traits were different at 3 and 12 months of age.

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CO23. ESTIGMA DA OBESIDADE PELOS NUTRICIONISTAS – UM APELO À EMPATIA PARA DIMINUIR DESIGUALDADES EM SAÚDE

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INTRODUÇÃO: Pessoas com obesidade sofrem frequentemente do estigma da obesidade (EO), ou seja, uma percepção negativa estereotipada associada ao excesso de peso. Este estigma está regularmente presente nos cuidados de saúde (CS) devido à responsabilização do indivíduo como estratégia motivadora para a ação, o que cria uma barreira à procura de apoio e leva a piores cuidados e indicadores de saúde física e mental.

OBJETIVOS: Descrever a percepção dos nutricionistas relativamente à presença e às consequências do EO nos cuidados de saúde, em Portugal.

METODOLOGIA: Os dados foram recolhidos entre 1 de novembro e 15 de dezembro de 2021, através de um questionário online composto por 17 perguntas direcionado a nutricionistas portugueses, utilizando uma amostragem não probabilística por bola de neve. Análise estatística através do SPSS.

RESULTADOS: A amostra ($n=84$) foi constituída maioritariamente por nutricionistas do sexo feminino (96,4%). Apesar de 96,4% afirmar conhecer o EO, 95,2% acreditar que existe nos CS e 96,7% considerar que pode impedir a adoção de comportamentos saudáveis, 48,8% acredita não comprometer o acesso a CS e 32,1% a sua qualidade. Adicionalmente, 66,6% considera que pode ter estigmatizado, inconscientemente, pessoas com obesidade, 96,6% consideram importante a educação dos pares relativamente ao EO e 97,6% mostra-se sensível à criação de campanhas de sensibilização sobre o tema, dos quais 78,6% estão disponíveis para colaborar no seu desenvolvimento.

CONCLUSÕES: Considerando as consequências do EO e a percepção dos nutricionistas relativamente à sua presença nos CS, torna-se fundamental promover um ambiente positivo, motivador, empático e sem julgamento. De realçar que, contrariamente ao que diz a literatura recente, uma elevada percentagem dos nutricionistas portugueses acredita que o EO não compromete o acesso e a qualidade dos CS. É por isso essencial realizar campanhas de sensibilização dirigidas aos mesmos para que retenham alguns comportamentos não estigmatizantes que devem passar a adotar.

CO24. INTERVENTION TO DECREASE SALT INTAKE AND INCREASE ADHERENCE TO SALT RECOMMENDATIONS USING AN INNOVATIVE DEVICE TO MONITOR AND CONTROL SALT USE WHEN COOKING AT HOME

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