P7 (continued)

population derived from National Health and Nutrition Examination Survey (NHANES). Study participants surveyed for sodium intake (mg/day) and physical examinations were conducted where systolic and diastolic BP were recorded.

Inclusion criteria included adults age 18-55 years. Our dataset contained 29,404 participants; of these, 11,441 participants met our inclusion criteria and constitute our study sample (2,424 missing data). Amongst these, 5,529 (48.33%) were men and 5,912 (51.67%) were women. In our study sample, the mean age was 35.90 (SD=11.25). Our study sample constituted 16.05% Mexican Americans, 9.92% other Hispanics, 38.60% Non-Hispanic White, 21.70% Non-Hispanic Black, and 13.73% other Race - including Multi-Racial.

Measurable Outcome/Analysis: Exposure variable is the consumption of sodium (mg per day). Outcome measure is average systolic and diastolic BP results collected from participants. Spearman Correlation along with regression analysis to quantitatively define the strength of association between sodium consumption vs systolic and diastolic BP.

Results: Mean sodium intake 3057.04 mg (SD 1688.58, IQR 1945). Mean systolic BP 118.42 mmHg (SD 18.36, IQR 22.0) and mean diastolic BP 65.78 mmHg (SD 14.98, IQR 17.33). No statistically significant correlation and linear relationship found between sodium intake and systolic BP or sodium intake and diastolic BP in both men and women.

Conclusions: There is no association between dietary sodium intake and systolic BP and diastolic BP. This may be due to the size of our sample, use of medications and the fact that the sodium intake was only based on 1 day. Average daily sodium intake was noted to be higher than the recommended daily allowance of 2300 mg/day.

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P8 Successful Reintroduction of Landrace Orange Maize in Rural Malawi is not Dependent on Understanding Nutritional Advantages

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Background: Orange maize, rich in carotenoids, is a possible sustainable solution for combating Vitamin A deficiency and reducing dependence on fortification. The

ProFarmer project in Malawi has successfully re-introduced landrace orange maize (MW5021) to replace or complement white hybrid varieties in over 2000 farms.

Objectives: This study was designed to determine the acceptability of foods made with orange maize in children and to assess the knowledge, attitudes and behaviors (KAB) of women in farming families that currently grow orange maize.

Study Design, Setting, Participants: Organoleptic evaluation of white and orange maize food products was carried out in school age children (n=160) of ProFarmer families living in the Dedza and Thyolo Districts. Additionally, a cross sectional study was completed in female household members (n=336) living on farms that produce orange maize. Participants were interviewed regarding reintroduction of orange maize and diet quality was assessed.

Measurable Outcome/Analysis: Acceptability of orange maize food products was determined using a 7-point hedonic scale. Women's responses to questionnaires were used to determine nutritional knowledge regarding orange maize. A Minimum Dietary Diversity questionnaire (MDD-W) evaluated diet adequacy. Independent t tests and Chi square tests were performed where appropriate.

Results: Organoleptic testing of orange maize porridges by children indicated high levels of acceptance. Survey results showed positive attitudes towards the orange maize with 75-85% of households consuming the product. However, only 32% of the women understood its nutritional benefits. Dietary Diversity scores, a proxy for nutrient adequacy, were low with only 34% of women consuming a sufficiently diverse diet.

Conclusions: Despite low levels of nutritional knowledge, landrace orange maize is well accepted by both children and adults in rural Malawi and is an option for increasing dietary sources of provitamin A. Nutrition education emphasizing the advantages of eating carotenoid-rich foods and expanding diet diversity are recommended.

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P9 Exploring Parental Beliefs and Practices Towards Sugar-Sweetened Beverage Intake in Young Children

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Background: High sugar-sweetened beverage (SSB) intake during childhood is a major risk factor for obesity and other adverse health outcomes. SSB include drinks with added sugar such as soda, fruit and sports drinks, flavored teas, and milk. SSB are high-calorie, low-nutrient, and major sources of added sugar. Nearly half (47%) of

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