

Newsletter – The School of Public Health University of Haifa

A Message from the Head of the School of Public Health – Prof. Orna Baron-Epel



Another year has passed by, and I am pleased to update you on what is happening at the School of Public Health. This year, 148 students started their master degree studies in seven different programs. This is approximately a 30% increase from last year. Overall there are 350 graduate students across the three years of study. Moreover, there are 22 doctoral students at various stages of study in our school.

This year, we received the university's approval to open a new study program in Community Mental Health. A student interested in community mental health will get a certificate indicating this field of specialization at the end of his study period. The program is based on collaboration between the School of Public Health and the Department of Community Mental Health within the Faculty of Social Welfare and Health

Sciences at the University of Haifa. In addition, a new MD/MPH study program was approved in which students from the medical school at the Technion will be able to combine their medical studies with our Public Health studies. We hope to have students in these two new programs for the next academic year.

This year is the second year of the International Studies Program in Global Health Leadership & Administration. This program is for both international and Israeli students. There are currently 16 foreign students from 10 different countries and this is a great increase in the number of students compared to last year. The courses are conducted in English and are taught over the fall, spring and summer semesters. In general, the courses are open to all students within the school. Part of the summer semester courses can be of special interest to our Israeli students. Some courses will be given by internationally renowned guest professors from abroad.

Newsletter Issue No. 4

01/01/2017

Editor in Chief

Prof. Orna Baron-Epel

Associate Editor

Dr. Sharon Sznitman

Producer:

Maria Liberzon

Contact Us:

School of Public Health

Tel: 04-8288597

mliberzon@univ.haifa.ac.il

Last year we organized a conference on "Positive Deviance". This is a new approach teaching us how to change and improve our health through successes and not through failures. This year, a conference on "Advocacy for Health Promotion" will take place in March 1st, in the Hecht Hall. You are all invited. Please register in advance.

As we reported last year, every year the Israeli Council for Higher Education performs a quality evaluation of different fields of study. As part of this assessment, the school prepared a large report regarding the structure, management, research and teaching quality of the school. Preparing this report was an internal quality assurance and assessment process. During May 2017, an international committee will be set up and visit all the Schools of Public Health in Israel in order to examine the quality of the schools. As part of the process, the school has to present its vision and the strategies to achieve this vision. In addition, school graduates were surveyed in order to learn from former students about their learning process during their studies and how their studies affected their job opportunities and professional life. We have already made changes in school activities in accordance with the survey findings.

All of us at the School of Public Health wish you good luck at the exams and further success in your studies. ■■■

Inside this issue:

[A Message from the Head of the School of Public Health – Prof. Orna Baron-Epel](#) 1

[Regulatory Committee for Promotion of Healthy Nutrition](#)
[Prof. Ronit Endevelt](#) 3

[New Study Program at the School of Public Health](#)
[Dr. Sharon Sznitman](#)....6

[Environmental and Occupational Health Program at the School of Public Health](#)
[Dr. Yonah Amster](#).....7

[Health Scientists Bridging Political Borders](#)
[Dr. Maya Negev](#).....8

[Selected Researchers at the School of Public Health](#)
[Dr. Roni Elran - Barak](#).....9

[Ph.D. Graduates at the School of Public Health - 2016](#)
[Dr. Orly Chillag-Talmor](#)..... 11
[Dr. Batia. S. Marom](#)
.....12

[Publications at the School of Public Health - 2016](#)
..... 13

Regulatory Committee for Promotion of Healthy Nutrition – Prof. Ronit Endevelt



The regulation committee chaired by the Ministry of Health aims to create a regulatory environment that will enable the population to consume healthier food.

Obesity and related chronic diseases, including diabetes, cardiovascular disease and cancer are the leading factors of mortality and morbidity in Israel. In recent years there has been a dramatic increase in the incidence of obesity: About 30% of children and 60% of adults are overweight and obese, 9.7% have diabetes and among the poor, the diabetes rate increases, to 25%.

Diet and physical activity has a decisive influence on the formation of these diseases. During the last 50 years, food composition and texture have changed, towards more ultra-processed and processed foods, many of which have low nutritional quality and very high calorie density.

The combination of the high availability of processed foods combined with aggressive marketing of these foods has contributed to an increase in caloric intake, changes in eating patterns and excessive intakes of sugar, sodium, saturated fats and preservatives, which in turn have led to obesity and its attendant morbidity. In addition, as a result of the industrialization process, certain foods have lost significant portions of their nutritional value, such as natural fiber, vitamins and minerals.

In light of these data, many countries around the world have decided to change the food environment so that the choice of healthy food will be easier for the population. The State of Israel has taken upon itself the challenge through a process of a national program "Healthy is possible." In this context the committee has established guidelines and suggested legislation for dietary regulation, so as to promote healthy nutrition of the population. The main rationale of the program is that - the food environment (food choice architecture) is the State's responsibility and changes to the food environment have the potential to be useful in reducing and even preventing mortality resultant from eating unhealthy food, followed by obesity and morbidity.

Target

Dietary recommendations for regulation of the environment to promote healthy diets for the population in Israel.

Methods

1. Establishment of an inter-disciplinary committee with representatives of various ministries, representatives of academia, professionals, industry and the general public.
2. Inviting experts with local and international experience in the field, to present aspects of nutrition regulation.
3. Promoting open dialogue with the public for review and recommendations.
4. Initiating focus groups with representatives of the populations in which the prevalence of obesity and chronic disease is particularly high.
5. Developing recommendations for legislation and regulation of issues related to healthy diets.

6. Continuous monitoring of the implementation of legislative and other measures.

Results

1. The information gathering process included 13 sessions during which the Committee heard experts with different perspectives related to nutrition and the environment, including international experts.

2. The process was transparent to the public. A conference of the committee was held, and conference presentations were published and uploaded on the website of the Ministry of Health. In addition, the public were able to express their opinion via email or via a dedicated website, or by involvement in focus groups (more than 1,000 people). As a result, 9 main themes/insights were identified and they included: the need for nutrition education; physical accessibility to healthy food; economic accessibility of healthy food; labeling of foods to enable intelligent choices, and internal layout and design of retail food stores.

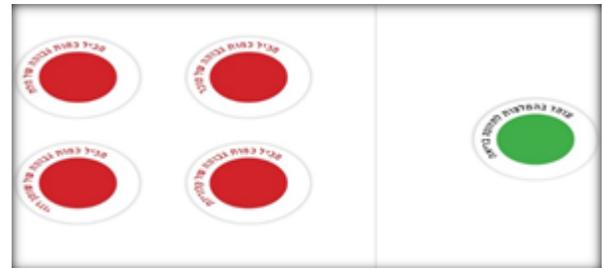
Recommendations were formulated in the area of economic regulation (accessibility of healthy food); Food labeling ; Restrictions on the marketing and advertising of harmful foods; reformulation of processed foods so as to reduce sodium, sugar and saturated fats levels in selected foods; regulation on nutrition within different education systems; Promoting healthy eating in large workplaces with food provided by the state; Encouraging small and medium manufacturers to produce healthy food; providing subsidies and incentives to encourage research grants for healthy food production through collaboration between scientists from various ministries; Promoting nutrition education and advocacy in the national education system and the media.

Below are details of the recommendations

A. Labelling on the front of package: informative and judgmental

1. Place judgmental "negative labels (icons)" on the front of the package: Mark the following nutrients: sugar, saturated fat, sodium and calories when above a certain level in food, and the label to contain the wording "contains a high amount of ... (element name)". Some foods may contain up to 3 such labels (symbols)

2. Mark judgmental "positive labels (symbols)" on the front of the package- for food products which meet certain nutrient content criteria, as recommended by the Ministry of Health. The label (symbol) will contain the text "This product meets the recommendations of the Ministry of Health for healthy nutrition". The design of the (symbol on the front of the package will be chosen at a later date.



3. Informative labeling – Nutrient labeling on the back of the package:

A. Highlighting (by different font or other means) the following nutrients: calories, fat, saturated fat, sugar and sodium.

B. Marking sugar content in teaspoons (each 4 grams of sugar = teaspoon).

C. Highlighting of food additives (by different font or other means)

D. Quantification of the total number of components in the product (a measure of the level of processing)

B. Restrictions on advertising and marketing of harmful food with a focus on advertising and marketing to children

1. Ban on harmful food advertising in the media (or during designated media viewing hours) for children up to age 16, by all means: written and electronic media, internet, social networks and film. Restrictions which will also apply to marketing content.

2. By means of adding messages to advertising: Advertising of foods with negative symbols will be allowed only if the advertisement includes the warning: "This food contains high amount of ... sugar/ fat/ sodium" in accordance with the categories defined for negative judgmental labeling as described in section relating to Food Labeling.

3. Definition of a harmful food: one that has one or more of the negative symbols.

4. Industry will begin the implementation of the recommendations initially as a voluntary process, and legislation will be implemented at a later stage.

C. Reformulation of processed foods

1. The use of negative marking on front of packaged foods will serve as a positive force in encouraging industry to promote reformulation of processed foods.

2. Implementing gradual changes so as to allow a gradual change in consumption patterns of the public and to allow the industry to implement changes correctly.

3. The creation of a professional unit of the Ministry of Health and the industry to continue work on reducing salt, sugar and saturated fat.

4. Prohibition of the use of trans fat.

D. Taxation of harmful food – This will be discussed at a later stage.

E. Encouraging production of healthy food

1. The establishment of a committee to encourage small and medium size producers in the production of healthy food. This committee to be headed by the public health services, and to include representatives of other ministries, namely finance, economics, local government and industry.

An examination of subsidies, research grants and incentives to encourage healthy food production, led by the Chief Scientist of the Ministry of Health in cooperation with the ministries of Economy, Finance, Agriculture and Science.

F. Economic accessibility of healthy food

1. Whole grains bread -A Standard to regulate consumer price of whole grain bread
2. Creation of a "healthy food basket" at affordable and reduced prices.

G. Nutrition education and national advocacy

1. Nutrition education from early childhood onwards, with the assistance of the Ministry of Health - the creation of innovative training schemes tailored to different ages and needs.

2. Suggest to the Ministry of Education to promote nutrition education by introducing one hour once a week for one semester for each school year level, to be given by nutritionists throughout childhood. The module should include science, sustainability and agriculture.

3. A new media campaign, to accompany the introduction of the updated Israeli Mediterranean diet-based guidelines, for healthy nutrition. ■



New Study Program at the School of Public Health Starting in the Fall of 2017 – Dr. Sharon Sznitman



In the fall of 2017 the School of Public Health is opening up a new study program in collaboration with the Department of Community Mental Health through which MPH students will specialize in community mental health. Mental health presents various challenges for public health professionals including stigma, recognizing risk factors, increasing awareness about mental disorders and related treatment, eradicating mental health disparities, and improving access to mental health services, especially for populations that are disproportionately affected.

The public mental health system in Israel is in the midst of a transformative change. The new study program aim to train and cultivate public health professionals who understand the theory and practice of public health and are dedicated to applying this knowledge to deal with current and emerging mental health issues. The MPH specialization in mental health is designed to address the important transformations taking place within the public mental health sector in Israel. Graduates will be prepared to navigate the intersections of research, practice, administration and policy development in a world with enormous mental health challenges. The program is especially suited for students who wish to work in the public mental health system and in

community organizations. We welcome you to become part of the next generation of public health professionals trained and ready for current and future mental health system transformations.

Courses:

In addition to courses at the school of public health, students will take 6 mandatory credits in the Department of Community Mental Health (introduction to psychiatric rehabilitation, introduction to community mental health and psychopathology) and 10 elective credits in the Department of Community Mental Health.

Faculty members

Head of Program: Dr. Sharon Sznitman.

The faculty members come from the fields of psychiatry, psychology, social and behavioral medicine, epidemiology, health management, and human resources. ■■■

Environmental and Occupational Health Program at the School of Public Health – Dr. Yonah Amster



The field of environmental and occupational health deals with the role environmental pollution and industrial hazards has on the health of communities and workers. The field is rapidly growing in Israel and around the world. Although there is increased interest among students, growth in research funding and rising awareness among policy makers, there continues to be a lack of resources to fund the necessary prevention programs or to address public health issues in communities already impacted by polluted environment and workplace hazards. This is primarily due to the fact that despite the increasing interest and awareness, the quantity of industrial emissions and other environmental hazards continues to grow. This past year has seen a particular focus on the state of environmental health, specifically air pollution in the Haifa Bay Area, a topic our department and other departments throughout the University have been leading both research and education.

Our department at the University of Haifa School of Public Health is in an ideal location to address many of the nation's most pressing environmental and occupational public health issues. Israel is plagued by one of the highest rate of occupational injury and mortality in OECD countries. A high proportion of occupational illness and injury in the country originates in the Haifa Industrial Area. According to the WHO, Israel has the 12th worst air pollution in the world. The question of

air pollution and chemical hazards in Haifa continues to plague the region's inhabitants, including the recent industrial fires at the Haifa oil refineries and other such incidents that have significant public health consequences.

These regional issues, and many other national and international environmental public health issues concerns, has motivated the recent growth of the department of Environmental and Occupational Health at the University of Haifa School of Public Health. Over the past two years our student population has tripled, we are in the process of recruiting two new faculty members to the department and have increased our research breadth and scope with new international collaborations. Our students come from diverse backgrounds including nurse managers in kupot cholim, occupational medicine physician, safety managers and industrial hygienist in both the public and private sector. Our graduates currently work in academia, government, private industry, hospitals and occupational medicine clinics. Our faculty includes leaders in policy, the ministry of health, regional medical centers and HMOs. The research interests of our faculty are equally diverse including the public health impact of climate change, energy production, the built environment, ecosystem services, industrial emissions, air pollution, occupational cancers, and workplace health promotion.

While the impact of environmental and industrial pollution continues to make headlines in Israel and throughout the world, it is our hope that through research, education and community outreach we can help improve environmental and occupational health in Haifa and beyond. ■

Health Scientists Bridging Political Borders: The Academy of Medical Sciences' Daniel Turnberg Travel Fellowship Scheme Alumni Conference 2016 – Dr. Maya Negev



In November 2016, I had the honor of participating in a unique scientific conference, the Alumni conference of the Daniel Turnberg Fellowships scheme. Dr. Daniel Turnberg was a Jewish British nephrologist and researcher, who died in a plane crash in 2007. His parents, Lord Leslie Turnberg of Cheadle FMedSci, and lady Edna Turnberg, set up in 2008 the Daniel Turnberg Travel Fellowship in his memory. The scheme fosters UK – Middle East collaborations in the field of biomedical sciences, and provides funding to early phase medical scientists to acquire experience in their field. To date, 190 young scientists participated in the scheme. Researchers from the Middle East travel to the UK to work with experts in their fields and learn new techniques, and so to UK scientists who travel to the Middle East. The scheme is open for participants from Lebanon, Jordan, the Palestinian Territories, Israel, Egypt, and the UK (Watts 2016).

As a fellow in the scheme, in 2013 I had the honor to spend a month working with Dr. Sari Kovats at the London School of Hygiene and Tropical Medicine. In 2013, there was a large reform in the public health system in England, which included the establishment of Public Health England (PHE). In England the Public Health Agency is an independent agency, and not a part of the Ministry of Health like in Israel. Also in 2013, the UK National Adaptation Plan to climate change was published, and our research explored how the public health sector in the UK.

adapts for climate change (Negev and Kovats 2016). It was a unique opportunity for me to start working on climate change and health, which became one of my main research interests.

In November 2016, I participated in the Alumni conference in Cyprus with over 90 alumni from Lebanon, Jordan, the Palestinian Territories, Israel, Egypt, and the UK. It was an extraordinary opportunity to meet excellent scientists from neighboring countries and hear about innovations in biomedical sciences beyond our field of expertise. The political borders quickly disappeared during the two day conference. The Scheme is open for applications, and the closing date for this round is 11 January 2017. I recommend young scientists in the biomedical sciences, including public health, to apply.

<http://www.acmedsci.ac.uk/grants-and-schemes/grant-schemes/daniel-turnberg-travel-fellowship/>

Watts, G. (2016). Fellowship links researchers in the UK and the Middle East. *The Lancet*, 388(10058), 2338-2339.

Negev, M., & Kovats, R. S. (2016). Climate change adaptation in the reorganized UK public health system: A view from local government. *Public Health*, 134, 102-104.

Lord Turnberg and Dr. Negev at the conference



Photo credit: Academy of Medical Sciences

Family Meal Frequency Among Children and Adolescents with Eating Disorders – Dr. Roni Elran - Barak



In recent years, there has been increasing interest in the topic of family meals. As a family therapist, I found this topic of family meals extremely interesting because I believe that family meals play a major role in the emotional and behavioral developments of children and youth. In addition, regular family meals may contribute to the prevention, early detection, and treatment of unhealthy eating patterns. Family meals provide an opportunity for role modeling healthy eating patterns, which may serve to reinforce adolescents' healthy eating habits and prevent disordered eating behaviors. Participating in meals together as a family gives parents the opportunity to gather information on teens' current functioning and furthermore gives parents the chance to observe eating habits and detect concerns early on. The implementation of consistent family meal patterns also plays a role in the treatment of adolescent eating disorders. For example, in a family-based treatment, an essential aspect of the treatment is to encourage parents to establish a regular meal schedule. Following a regular meal schedule, which increases accountability, may help patients with anorexia nervosa (AN) to achieve weight gain

and may reduce bingeing and purging in patients with bulimia nervosa (BN). Despite the understanding of the psychological and physical values of family mealtime, there has been a lack of research done specifically on family meal frequency among youth with current diagnoses of an eating disorder.

I will present a study that I have conducted with my colleagues at the University of Chicago (M. Sztainer, AB. Goldschmidt, D. Le Grange). This study focused on the subject of family meals and was the first to examine family meal frequency and eating disorder psychopathology among clinical samples of adolescents with eating disorders. The study was aimed to answer two questions: (1) What is the frequency of family meals among children and adolescents with AN, BN, and feeding or eating disorder not elsewhere classified (FED-NEC)? and (2) Is family meal frequency associated with eating disorder psychopathology among youth with eating disorders? Findings from this study contributed to the understanding of the role that family meals play among youth with eating disorders and had implications for adaptations and new developments for treatment.

Participants included 154 children and adolescents ($M=14.92\pm 2.62$), who met criteria for AN ($n=60$), BN ($n=32$), or FED-NEC ($n=62$). All participants completed the Eating Disorder Examination and the Family Meal Questionnaire prior to treatment at the University of Chicago Eating Disorders Program. Results indicated that AN and BN

participants significantly differed in terms of family meal frequency. A majority of participants with AN (71.7%), compared with less than half (43.7%) of participants with BN, reported eating dinner with their family frequently (five or more times per week). Family meal frequency during dinner was significantly and negatively correlated with dietary restraints and eating concerns among participants with BN ($r=-.381$, $r=-.366$, $p<.05$) and FED-NEC ($r=-.340$, $r=-.276$, $p < .05$).

This study built upon the extant literature suggesting that family meals may help to protect against disordered eating attitudes and behaviors, by identifying several correlations between family meal frequency and eating disorder psychopathology in a clinical sample. We concluded that AN patients' higher family meal frequency may be explained by their parents' relatively greater vigilance over eating, whereas families of BN patients may be less aware of eating disorder behaviors and hence less insistent upon family meals. Additionally, children and adolescents with AN may be more inhibited and withdrawn and therefore are perhaps more likely to stay at home and eat together with their families. ■

Development and Application of a Refined Drug-tracer Algorithm to Assess Parkinson's Disease Epidemiology in Israel; Big data analysis, 1998-2008 – Dr. Orly Chillag-Talmor



Background: Parkinson's disease (PD) is a progressive, disabling neurodegenerative disease. The burden of PD morbidity on health services and society is expected to increase with the aging of the population. Estimation of PD rates is essential for policy planning and for PD research. However, few PD registries exist, and classic applied methodologies (door-to-door surveys, clinic-based studies) are costly and time-consuming. The aim of this study was to estimate PD prevalence, incidence and survival in the general Israeli population over a decade, using pharmacy computerized databases. We developed and validated a refined, drug-tracer algorithm for assessment of PD cases (at definite, probable or possible certainty levels) based on purchases of anti-parkinsonian drugs and patterns of drug consumption. Then we applied it to the prescription database of "Maccabi Healthcare Services" for the years 1998-2008, and established a cohort of 7,134 PD patients, including prevalent and incident cases.

Findings & conclusions: Over the years 2000-2007, PD incidence rate of 33/100,000 was unchanged, and the prevalence rate increased from 170/100,000 to 256/100,000. Both rates increased with age, and for ages 50+, they were higher among men (1.38-fold for prevalence; 1.45-fold for incidence). Female patients lived longer after treatment initiation, and survived to an older age compared to men (HR=0.7). Compared to the general population, survival of PD patients was significantly lower (SMRmen=1.69, SMRwomen=1.49, $p<0.05$). Age at initiation of anti-PD treatment also affected survival of the patients. Thus, future studies should consider gender and age groups as distinct PD clusters with regard to risk, disease management and survival. Our data suggest a steep increase in the prevalence rate of PD over the studied decade, and considerable incidence rates. These findings demonstrate the growing burden expected by PD morbidity in Israel, and should be the base for future national resource planning.

Dissertation supervisors: Prof. Shai Linn (School of Public Health, University of Haifa) and Prof. Chava Peretz (School of Public Health, Tel Aviv University). ■

Evaluation of Factors Related to Work Participation after Hand Injuries among Jews and Arab Manual Workers in Northern Israel – Dr. Batia. S. Marom



Introduction: Hand injuries (HI) are common and may limit participation in work. Difficulties in returning to work may cause economic and social distress to the injured person and impose a burden on society at large. Also, HI requires a long duration of treatment at a great cost in terms of health care and long periods of absenteeism (lost productivity). It is agreed that medical conditions and objective medical findings are not the only factors that can predict return to work (RTW). The current literature emphasizes the integration between medical, psychosocial, personal and environmental variables. The purpose of the cohort study was to determine which factors effect time to return to work (TRTW) 12 months after HI among Jews and Arab manual workers. The sample included 178 subjects, 90 Arab and 88 Jews who were treated in occupational therapy clinics of Clailt Health Services between 2012-2014.

Main findings: At the end of the study, 75.3% (79.5% of Jews and 71.1% of Arabs) of the participants RTW. No significant difference was found in the rate of RTW between Jewish and Arab manual workers. A significant statistical difference between the survival rates over time ($P = .05$) was found between the two groups. The median TRTW among the Jewish subjects was 101 days

(CI 78.01-123.98) compared to 151 days (CI 93.80-148.19) among the Arab subjects. In the final model, level of self-efficacy, legal counsel, ethnicity, subject's specific job demands repetitive hand movements, level of workload/job control, National Insurance Institute work disability benefit claim, pain, the physical capability of the hand, emotional response to trauma, and level of self-reporting of physical function and symptoms were associated with TRTW.

Study contribution: Patients with a lower level of self-efficacy need special attention during the rehabilitation period. We recommend emphasizing pain, emotional responses for the traumatic injury event, and specific job demands related to occupational hand use in the evaluation and rehabilitation process. We also recommend developing work hardening programs for those who are at risk for not RTW. Further studies are recommended in order to examine other cultural factors such as attitudes and beliefs about illness and disability that may explain the discrepancies in TRTW.

Dissertation supervisors: Prof. Rafael S. Carel, School of Public Health, University of Haifa, Dr. Moshe Sharabi, Sociology and Anthropology Department, The Max Stern Yezreel Valley College, and Prof. Navah Z. Ratzon, Department of Occupational Therapy, Sackler faculty, Tel Aviv University.

* The study was partly supported by a grant from the National Insurance Institute of Israel. ■

Prof. Orna Baron-Epel

Publications:

Amit-Aharon, A., Nehama, H., Rishpon, S., & **Baron-Epel, O.** (Published online: November 21, 2016). Parents with high levels of communicative and critical health literacy are less likely to vaccinate their children. *Patient Education and Counseling*. DOI: 10.1016/j.pec.2016.11.016

Baron-Epel, O., Obid S., Fertig, S., & Gitelman. V. (2016). Perceived descriptive safety-related driving norms within and outside Arab towns and villages in Israel. *Traffic Injury Prevention*, 17(1), 51-57.

Baron-Epel, O., Berardi, V., Bellettiere, J., & Shalata, W. (2016). The relation between discrimination, sense of coherence and health varies according to ethnicity; a study among three distinct populations in Israel. *Journal of Immigration and Minority Health*, 18(3). DOI: 10.1007/s10903-016-0449-4.

Berardi, V., Bellettiere, J., Nativ, O., Slezak, L., Hovell, F.M., & **Baron-Epel, O.** (2016). Fatalism, Diabetes Management Outcomes, and the Role of Religiosity. *Health and Religion*, 55(2), 602-617.

Elias, W., Bord, S., **Baron-Epel, O.**, Gesser-Edelsburg, A., & Shiftan, Y. (Published online: October 18, 2016). Factors influencing the decision to engage in alcohol-impaired driving among Arab-Israeli youths. *Transportation Research Part F: Traffic Psychology and Behaviour*, 44, 180-191. DOI: 10.1016/j.trf.2016.09.024.

Heymann, A., O. Fridman, N., Kaplan, G., & **Baron-Epel, O.** (2016). Unsupportive social interactions are associated with Poorer Self-Reported Health in Israeli patients with diabetes. *American Journal of Health Behavior*, 40(5), 645-651.

Kaplan, G., & **Baron-Epel, O.** (2016). Decision-makers' acquaintance with the public's priorities in health services. *Israel Journal of Health Policy Research*, 5, 32.

Levin-Zamir, D., El Hayani, A., & **Baron-Epel, O.** (2016). The relationship between health literacy, health behavior, socio-economic indicators and self-assessed health in a national adult sample in Israel. *Journal of Health Communication*, 21, sup2, 61-68.

Moran, M., **Baron-Epel, O.**, & Plaut, P. (2016). Do children walk where they bike? Exploring built environment correlates of children's walking and bicycling. *Journal of Transportation and Land Use*, 9(2), 1-23.

Neter, E., Brainin, E., & **Baron-Epel, O.** (2016). Health literacy and eHealth literacy; structure, association and group differences. *European Health Psychologist*, 17 (6), 275-280.

Tesler, R, Harel-Fisch, Y, & **Baron-Epel O.** (2016). School health promotion policies and adolescent risk behaviors in Israel: a multilevel analysis. *Journal School Health*, 86, 435-443.

Prof. Orna Baron – Epel (continue)

Recent Grants:

Baron-Epel, O., & Bord, S. Evaluating a campaign on Brucellosis. Funded by MOH.

Baron-Epel, O., Zelber-Sagi, S., & Bord, S. (2016). Evaluation of the HENRY project. Funded by Ashalim.

Baron-Epel, O., Bord, S., & Tesler, R. Evaluation of a workplace intervention to decrease alcohol and drug abuse. Funded by Drug and Alcohol National Authority.

Baron-Epel, O., & Shor, A. Evaluating three models of primary health care. Funded by The National Institute for Health Policy.

Dr. Shiran Bord

Publications:

Oshri, A., Carlson, M. W., **Bord, S.,** & Zeichner, A. (2016). Alcohol-impaired driving: the influence of adverse rearing environments, alcohol, cannabis use, and the moderating role of anxiety. *Substance Use & Misuse*, 1-11. DOI: 10.1080/10826084.2016.1245336.

Elias, W., **Bord, S.,** Baron-Epel, O., Gesser-Edelsburg, A., & Shiftan, Y. (Published online: October 18, 2016). Factors influencing the decision to engage in alcohol-impaired driving among Arab-Israeli youths. *Transportation Research Part F: Traffic Psychology and Behaviour*, 44, 180-191. DOI: 10.1016/j.trf.2016.09.024.

Recent Grants:

Baron-Epel, O., & **Bord, S.** Evaluation of the brucellosis prevention campaign. Funded by MOH.

Baron-Epel, O., Zelber-Sagi, S., & **Bord, S.** (2016). Evaluation of a national nutrition program among young children (HENRY project). Funded by Joint - Ashalim.

Baron-Epel, O., **Bord, S.,** & Tesler, R Identification of social and well being changes among participants in a net ball league "Mamanet". Funded by Ministry of Science, Technology and Space.

Baron-Epel, O., **Bord, S.,** & Tesler, R "Mamanet Program" (Mothers' newcombe League) as a substance abuse prevention tool based on the human capital model. Funded by Israel Anti-Drug Authority.

Prof. Ronit Endevelt

Recent Grants:

Endevelt, R., Tsoducov, F., Mosenzon, O., & Peleg Weiss, L. Interventional research for prevention of diabetes in mental health hostels. Funded by Ozma.

Dr. Roni Elran-Barak

Publications:

Elran-Barak, R., Blumstein, B., Boyko, V., Lerner-Geva, L., & Benyamini, Y. (2016). Overweight and Obese Midlife Women in Israel: Cultural Differences in Perceived Weight Status. *International Journal of Public Health*, 61(1), 39-47.

Elran-Barak, R., Barak, A., Lomranz, J., & Benyamini, Y. (2016). Proactive Aging among Holocaust Survivors: Striving for the Best Possible Life. *Journal of Gerontology: Social Sciences*. DOI: [10.1093/geronb/gbw136](https://doi.org/10.1093/geronb/gbw136).

Dr. Anat Gesser-Edelsburg

Publications:

Elias, W., Baron-Epel, O., Bord, S., **Gesser-Edelsburg, A.**, & Shiftan, Y. (Published online: October 18, 2016). Factors influencing the decision to engage in alcohol-impaired driving among Arab-Israeli youths. *Transportation Research Part F: Traffic Psychology and Behaviour*, 44, 180-191. DOI: 10.1016/j.trf.2016.09.024.

Gesser-Edelsburg, A. & Guttman, N. (2016). The usage of Entertainment-Education in health promotion. . In O. Epel-Baron, N. Daoud, & D. Levin-Zamir (Eds.), *Health Promotion – From Theory to Practice* (pp.195-212). Tel Aviv: Dyonon/ ProBook (In Hebrew).

Gesser-Edelsburg, A. & Guttman, N. (2016). The usage of Social Marketing in health promotion. In O. Epel-Baron, N. Daoud, & D. Levin-Zamir (Eds.), *Health Promotion – From Theory to Practice* (pp.177-193). Tel Aviv: Dyonon/ ProBook. (In Hebrew).

Gesser-Edelsburg, A., & Shbat, S. (Published online: March 14, 2016). A Qualitative study of the integration of Arab Muslim Israelis suffering from mental disorders into the normative community. *Journal of Immigrant and Minority Health*. DOI: 10.1007/s10903-016-0389-z

Gesser-Edelsburg, A., & Shir-Raz, Y. (Published online: August 7, 2016). Communicating risk for issues that involve "Uncertainty Bias": What can the Israeli case of water fluoridation teach us? *Journal of Risk Research*. DOI: 10.1080/13669877.2016.1215343.

Gesser-Edelsburg, A., & Shir-Raz, Y. (2016). *Risk Communication and Infectious Diseases in an Age of Digital Media*. London: Routledge. <https://www.routledge.com/Risk-Communication-and-Infectious-Diseases-in-an-Age-of-Digital-Media/Gesser-Edelsburg-Shir-Raz/p/book/9781138186064>.

Gesser-Edelsburg, A., Shir-Raz, Y., Sassoni Bar-Lev, O., & Green, M.S. (2016). Outbreak or epidemic? How Obama's language choice transformed the Ebola outbreak into an epidemic. *Disaster Medicine and Public Health Preparedness*, 10(4), 669-673.

Gesser-Edelsburg, A., Walter, N., & Shir-Raz, Y. (Published online: May 18, 2016). The "new public" and the "good ol' press": Evaluating online news sources during the 2013 polio outbreak in Israel. *Health Communication*, 32 (2), 169-179. DOI: 1080/10410236.2015.1110224

Gesser-Edelsburg, A., Walter, N., Shir-Raz, Y., Sassoni Bar-Lev, O., Rosenblat, S. (Published online: November 14, 2016). The behind-the-scenes of parental decision-making discourse regarding childhood vaccination. *American Journal of Infection Control*. DOI: 10.1016/j.ajic.2016.10.009.

Recent Grants:

Green, M.S., **Gesser-Edelsburg, A.**, Baron-Epel, O. ASSET: Action Plan on Science in Society in Epidemics and Total Pandemics. Funded by European Commission - FP7-Science in Society.

Prof. Manfred Green

Publications:

Gesser-Edelsburg, A., Shir-Raz, Y., Sassoni Bar-Lev, O., & **Green, M.S.** (2016). Outbreak or epidemic? How Obama's language choice transformed the Ebola outbreak into an epidemic. *Disaster Medicine and Public Health Preparedness*, 10(4), 669-673.

Paz, S., Negev, M., Clermont, A., & **Green, M.S.** (2016). Health aspects of climate change in cities with Mediterranean climate, and local adaptation plans. *International Journal of Environmental Research and Public Health*, 13(4), 438.

Recent Grants:

Green, M.S., **Gesser-Edelsburg, A.**, Baron-Epel, O. ASSET: Action Plan on Science in Society in Epidemics and Total Pandemics. Funded by European Commission - FP7-Science in Society.

Green, M., Dor, M. **Sznitman, S.R.** Assessing effectiveness and side effects of medical cannabis among oncology patients, doctors and nurses in Israel. Funded by The Israeli National Institute for Health Policy Research.

Prof. Lital Keinan-Boker

Publications:

Amitay, E.L., Dubnov Raz, G., & **Keinan Boker L.** (2016). Breastfeeding, other early life exposures and childhood leukemia and lymphoma. *Nutrition and Cancer* 68(6), 968-977.

Bassal, R., Schejter, E., Bachar, R., Perri, T., Korach, J., Jakobson-Setton, A., Ben-David, L.H., Cohen, D., & **Keinan-Boker, L.** (2016). Risk factors for Cervical Cancer and Cervical Intraepithelial Neoplasia 3 (CIN3) in Jewish women in Israel; Two Case Control Studies. *The Asian-Pacific journal of Cancer Prevention*, 17(4), 2067-2073.

Buch, A., Carmeli, E., **Keinan-Boker, L.**, Marcus, Y., Shefer, G., Kis, O., Berner, Y., & Stern, N. (2016). Muscle function and fat content in relation to sarcopenia, obesity and frailty of old age--An overview. *Experimental Gerontology*, 76, 25-32.

Dankner, R., Boffetta, P., Balicer, R.D., **Keinan- Boker, L.**, Sadeh, M., Berlin, A., Olmer, L., Goldfracht, M., & Freedman, L.S. (2016). Time-dependent risk of cancer after a diabetes diagnosis in a cohort of 2.3 million adults. *American Journal of Epidemiology*, 183(12), 1098-1106.

Dankner, R., Boffetta, P., **Keinan-Boker, L.**, Balicer, R., Berlin, A., Olmer, L., Murad, H., Silverman, B.G., Hoshen, M., & Freedman, L. (2016). Diabetes, prostate cancer screening, and risk of low- and high-grade prostate cancer: a 10-year historical population follow up study of more than 1 million men. *Diabetologia*, 59(8), 1683-1691. DOI: 10.1007/s00125-016-3972-x.

Davarashvili, S., Zusman, M., **Keinan-Boker, L.**, Rybnikova, N., Kaufman, Z., Silverman, B.G., Dubnov, J., Linn, S., & Portnov, B.A. (2016). Application of the double kernel density approach to the analysis of cancer incidence in a major metropolitan area. *Environmental Research*, 150, 269-281. **Keinan-Boker, L.**, & Goldbourt, U. (2016). Cancer incidence in Holocaust male survivors-An Israeli cohort study. *International Journal of Cancer*, 39(11), 2426-2435. DOI: 10.1002/ijc.30378.

Hayek, S., Enav, T., Shohat, T., & **Keinan-Boker. L.** (2016). Factors correlated with breast cancer screening in a country with national health insurance: Did we succeed in reducing health care disparities? *Journal of Women's Health*. DOI: 10.1089/jwh.2016.5835.

Keinan-Boker, L., Levine, H., Derazne, E., Molina-Hazan, V., Kark, J.D. (2016). Measured adolescent body mass index and adult breast cancer in a cohort of 951,480 women. *Breast Cancer Research and Treatment*, 158(1), 157-167.

Keinan-Boker, L., & Silverman, B.G. (2016). Trends of thyroid cancer in Israel: 1980-2012. *Rambam Maimonides Med J.*, 7(1): e0001. doi: 10.5041/RMMJ.10228.

Laitman, Y., **Boker-Keinan, L.**, Berkenstadt, M., Liphshitz, I., Weissglas-Volkov, D., Ries-Levavi, L., Sarouk, I., Pras, E., & Friedman, E. (2016). The risk for developing cancer in Israeli ATM, BLM, and FANCC heterozygous mutation carriers. *Cancer Genetics*, 209(3), 70-74.

Prof. Lital Keinan-Boker (continue)

Publications (continue):

Leiba, M., Leiba, A., **Keinan-Boker, L.**, Avigdor, A., Derazne, E., Levine, H., & Kark, J.D. (2016). Adolescent weight and height are predictors of specific Non-Hodgkin Lymphoma Subtypes among a cohort of 2,352,988 individuals aged 16 to 19 years. *Cancer*, 122(7), 1068-77.

Levine, H., Leiba, M., Bar Zeev, Y., **Keinan-Boker, L.**, Derazne, E., Leiba, A., & Kark, J.D. (2016). Risk of Hodgkin lymphoma according to immigration status and origin: a migrant cohort study of 2.3 million Jewish Israelis. *Leukemia and Lymphoma*. DOI: 10.1080/10428194.2016.1220552.

NCD Risk Factor Collaboration (NCD-RisC) (2016). Trends in adult body mass index in 200 countries from 1975 to 2014: a pooled analysis of 1698 population-based measurement studies with 19.2 million participants. *The Lancet*, 387(10026), 1377-1396. doi: 10.1016/S0140-6736(16)30054-X.

NCD Risk Factor Collaboration (NCD-RisC) (2016). A century of trends in adult human height. *ELife*, 5, e13410. DOI: 10.7554/eLife.13410.

Sharabi, I.S., Levin, A., Schiff, E., Samuels, N., Agour, O., Tapiro, Y., Lev, E., **Keinan-Boker, L.**, & Ben-Arye, E. (2016). Quality-of-life related outcomes from a patient-tailored integrative medicine program: experience of Russian-speaking patients with cancer in Israel. *The Journal of Supportive Care in Cancer*, 24(10), 4345-4355.

Vanham, D., Del Pozo, S., Pekcan, A.G., **Keinan-Boker, L.**, Trichopoulou, A., Gawlik, B.M. (2016). Water consumption related to different diets in Mediterranean cities. *Science of the Total Environment*, 573, 96-105.

Wang, Q., Afshin, A., Yakoob, M.Y., Singh, G.M., Rehm, C.D., Khatibzadeh, S., Micha, R., Shi, P., Mozaffarian, D., Global Burden of Diseases Nutrition and Chronic Diseases Expert Group (NutriCoDE). (2016). Impact of nonoptimal intakes of saturated, polyunsaturated, and trans fat on global burdens of Coronary Heart Disease. *Journal of the American Heart Association*, 20, 5(1), e002891. doi: 10.1161/JAHA.115.002891.

Zlotnik, S., Finkelstein, A., **Keinan-Boker, L.**, & Agmon, M. (2016). A matched case-control study comparing the health status of youth village alumni in Israel to the general population. *Health and Social Care in the Community*. DOI: 10.1111/hsc.12379.

Recent Grants:

Keinan-Boker, L., Castel-Cohen, O., & Dagan, E. Oncology healthcare teams usage of health information technologies for oral anti-cancer treatment coordination, and its effect on continuity of care and patients' adherence to treatment. Funded by The Israel National Institute for Health Policy and Health Services Research.

Keinan-Boker, L., & Kark, J.D. The association of exposure in adolescence to environmental pollution in the Haifa Bay Area with health outcomes at age 17 and cancer incidence in adulthood. Funded by Ministry of Environment Protection.

Prof. Yael Latzer

Publications:

Boniell-Nissim, M. & **Latzer Y.** (2016). "Fat Cow" writes a blog: the story of Pro-Ana community. In Y. Latzer & D. Stein (Eds.), *Bio-Psycho-Social Contributions to Understanding Eating Disorders* (pp.155-168). USA: Springer Publishers.

Dori-Frenkel, T., **Latzer, Y** & Lev, R. (2016). The relationship between super women model, self report image, and disordered eating pathology among ultraorthodox, and modern orthodox women in Israel. *Jerusalem Institute for Israel Research, The Center of Oltraortodox Society.*

Enten-Vissoker, R., Berger, D., **Latzer Y.**, & Gal, E. (2016). Food selectivity, gastrointestinal dysfunction and Urine organic acids in Autism spectrum disorder: An integrative study. *Food and Nutrition Sciences*, 3(5), 417-423.

Gilat, Y. & **Latzer, Y.** (2016). Emotional first aid in eating disorders: the unique role of hotlines and online services. In Y. Latzer & D. Stein (Eds.), *Bio-Psycho-Social Contributions to Understanding Eating Disorders* (pp.141-154). USA: Springer Publishers.

Latzer, Y. (2016). Media and ED. *Dvarim*, 9. (In Hebrew).

Latzer, Y., & Daniel Stein (Eds.). (2016). *Bio-Psycho-Social Contributions to Understanding Eating Disorders*. USA: Springer Publishers.

Latzer, Y. & Stein, D. (2016). Introduction. In Y. Latzer & D. Stein (Eds.), *Bio-Psycho-Social Contributions to Understanding Eating Disorders* (pp. xiii-xxvi). USA: Springer Publishers.

Latzer, Y. & Tzchinsky, O. (2016). The relationship between eating and sleeping among adolescents. In Y. Latzer & D. Stein (Eds.), *Bio-Psycho-Social Contributions to Understanding Eating Disorders* (pp. 17-34). USA: Springer Publishers.

Mazzeo, S. E., Lydecker, J, Harney, M., Palmberg, A. A., Kelly, N. R., Gow R. W., Bean, M. K., Thornton, L. M., Tanofsky-Kraff, M., Bulik, C. M., **Latzer, Y.** & Stern, M. (2016). Development and Preliminary Effectiveness of an Innovative Treatment for Binge Eating in Racially Diverse Adolescent Girls. *Journal of Adolescent Health*. 22, 199-205.

Prof. Yael Latzer (continue)

Publications (continue):

Sadeh-Sharvit, S., Levy-Shiff, R., Ram, A., Gur, E., Zubery, E., Steiner, E., Zusman, M., Eines, M., & **Latzer, Y.** (2016). Mothers with eating disorders: the environmental factors affecting eating-related emotional difficulties in their offspring. In Y. Latzer & D. Stein (Eds.) *Bio-Psycho-Social Contributions to Understanding Eating Disorders*. (pp.77-90). USA: Springer Publishers.

Zukerman-Levin, N., Hochberg, Z., & **Latzer, Y.** (2016). Endocrinopathies of eating disorders. In Y. Latzer & D. Stein (Eds.), *Bio-Psycho-Social Contributions to Understanding Eating Disorders* (pp. 35-50). USA: Springer Publishers.

Zukerman-Levin, N., Hochberg, Z. & **Latzer, Y.** (2016). Skeletal involvement in eating disorders. In Y. Latzer & D. Stein (Eds.), *Bio-Psycho-Social Contributions to Understanding Eating Disorders* (pp 51-64). USA: Springer Publishers.

Zubery, E., **Latzer, Y.**, & Stein, D. (2016). Eating disorders among women with a history of sexual abuse: An integrative treatment approach. In Y. Latzer & D. Stein (Eds.), *Bio-Psycho-Social Contributions to Understanding Eating Disorders* (pp.105-124). USA: Springer Publishers.

Recent Grants:

Latzer, Y., & Burstein-Klomeke, A. The role of Interpersonal relationship before and after Bariatric surgery. Funded by Maccabi Health Care Services.

Dr. Maya Negev

Publications:

Negev M. (2016). Improving cleanliness in the public space in Israel. *Ecology and Environment*, 7(1), 33-40. (In Hebrew).

Negev M. (2016), Multicultural policy in education for sustainability. In G. Ben-Porat, Y. Yona, & B. Bashir (Eds.), *Multiculturalism and public policy* (pp.94-130). Van Leer Institute :Jerusalem.

Negev, M., & Kovats, S. (2016). Climate change adaptation in the reorganized UK public health system: a view from local government. *Public Health*, 134, 102-104.

<http://dx.doi.org/10.1016/j.puhe.2015.12.001>.

Paz, S., **Negev, M.**, Clermont, A., & Green, M.S. (2016). Health aspects of climate change in cities with Mediterranean climate, and local adaptation plans. *International Journal of Environmental Research and Public Health*, 13(4), 438.

Recent Grants:

Negev, M., Berman, T., Ardi, R. Reicher, S., & Grotto, I. Chemicals in toys and baby products. Funded by Environment and Health Fund.

Izhaki, I., Lotan, A., Wittenberg, L., Zemah Shamir, S., **Negev, M.**, Hassan, Y. Ecosystem services in the Carmel Mt. Funded by Ministry of Environmental Protection.

Feitelson, E., **Negev, M.**, Razin, E., Segal, E. Policy Packages for Preparedness to Earthquakes – local level. Funded by Ministry of Science.

Sznitman, S., **Negev, M.**, Vulfsons, S., & Jacobson, E. Medical Cannabis Policies. Funded by Israel National Institute for Health Policy Research.

Dr. Maya Peled-Raz

Publications:

Peled-Raz, M. (2016). Legitimate governmental intervention in decisions relating to the health of the individual. In O. Baron-Epel, N. Daoud, & D. Levin-Zamir (Eds.), *Health Promotion – From Theory to Practice* (pp.213-231). Tel Aviv: Dyonon/ ProBook (In Hebrew).

Willner, N., **Peled-Raz, M.**, Shteinberg, D., Shteinberg, M., Keren, D., & Rainis, T. (2016). Digital recording and documentation of endoscopic procedures: Do patients and doctors think alike? *Canadian Journal of Gastroenterology and Hepatology*, 2016, Article ID 2493470.

<http://dx.doi.org/10.1155/2016/2493470>.

Recent Grants:

Peled-Raz, M., Enosh, G., Tzafrir, S., Doron., I. The Meaning and Experience of Research Ethical Review Boards (ERBs) in the Social Sciences. Funded by ISF.

Prof. Shmuel Rishpon

Publications:

Amit-Aharon, A., Nehama, H., **Rishpon, S.**, & Baron-Epel, O. (Published online: November 21, 2016). Parents with high levels of communicative and critical health literacy are less likely to vaccinate their children. *Patient Education and Counseling*. DOI: 10.1016/j.pec.2016.11.016.

Dr. Lisa Rubin

Publications:

Netzer-Tomkins, H., **Rubin, L.**, & Ephros, M. (2016). Breastfeeding is Associated with Decreased Hospitalization for Neonatal Fever. *Breastfeeding Medicine*, 11(5), 218-221.

Rubin, L., & Landsman, K., (2016). The importance of social networking in a national polio vaccine campaign. *Pediatrics*, 138(2), e20154658.

Tasher, D., **Rubin, L.**, Grossman, Z., Grotto, I., Dahan, D., Berlowitz, Y., & Somekh, E. (2016). Child Health Care in Israel. *Journal of Pediatrics*, 177S, S107-15.

Dr. Sharon Sznitman

Publications:

Kuperman, P., & **Sznitman, S.R.** (2016). Heteronormativity and the Israeli healthcare experience, a qualitative study of LGBTQ individuals. *Psychology of Sexualities Review*, 7(2), 26-38.

Margolis, A., Rosca, P., Kurs, R., **Sznitman, S.R.**, & Grinshpoon, A. (2016). Routine drug screening for patients in the Emergency Department of a State Psychiatric Hospital: A naturalistic cohort study. *Journal of Dual Diagnosis*, 12(3-4), 218-226.

Sznitman, S.R. (2016). The Cannabis Abuse Screening Test (CAST) revisited: Examining measurement invariance by age. *International Journal of Methods in Psychiatric Methods*. DOI: 10.1002/mpr.1529.

Sznitman, S.R., Goldberg, V., Sheinman-Yuffe, H., Flechter, E., & Bar-Sela, G. (2016), Storage and disposal of medical cannabis among oncology patients: assessing the risk of diversion and unintentional digestion, *Cancer*. 122(21):3363-3370. DOI: 10.1002/cncr.30185.

Sznitman, S.R., & Taubman, D. (2016) Drug use normalization: A systematic and critical Mixed Methods review. *Journal of Studies on Alcohol and Drugs*, 77(5), 700-709.

Recent Grants:

Green, M., Dor, M., & **Sznitman, S.R.** Assessing effectiveness and side effects of medical cannabis among oncology patients, doctors and nurses in Israel. Funded by The Israeli National Institute for Health Policy Research.

Sznitman, S.R., Negev, M., & Vulfsons, S. Medical cannabis policies: An analysis of the current situation and development of a framework for decision-making. Funded by The Israeli National Institute for Health Policy Research

Sznitman, S.R., Storbjork, J., & Svensson, J. Heavy drinking, perceived drunkenness and harm in the night time economy. Funded by Swedish Alcohol Research.

Dr. Galit Weinstein

Recent Grants:

Camargo, E.C. ¹, **Weinstein, G.** ¹, Beiser, A., Tan, Z.S., DeCarli, C., Kelly-Hayes, M., Kase, C., Murabito, J.M., & Seshadri, S. (2016). Association of physical function with clinical and subclinical brain disease: The Framingham offspring Study. *Journal of Alzheimers Disease*, 14, 53(4), 1597-1608. ¹shared 1st authorship.

Weinstein, G. (2016). Childhood conditions and current physical performance among non-institutionalized individuals aged 50+ in Israel. *European Journal of Ageing*, 13(4), 335-347.

Weinstein, G., Beiser, A.S., Preisa, S.R., Courchesnea, P., Chourakia, V., Levy, D., & Seshadri, S. (2016). Plasma clusterin levels and risk of dementia, Alzheimer's disease and stroke. *Alzheimer's & Dementia (Amst)*, 3, 103-109.

Weinstein, G., Lutski, M., Goldbourt, U., & Tanne, D. (2016). C-reactive protein is related to future cognitive impairment and decline in elderly with cardiovascular disease. *Archives of Gerontology and Geriatrics*, 69, 31-37.

Weinstein, G., Preis, S.R., Beiser, A.S., Kaess, B., Chen, T.C., Satizabal, C.L., Rahman, F., Benjamin, E.J., Ramachandran, V.S., & Seshadri, S. (2016). Clinical and Environmental Correlates of Serum BDNF: A descriptive study with plausible implications for AD research. *Current Alzheimer's Research*, 53(4), 1597-1608.

Recent Grants:

Weinstein, G., Seshadri, S., Beiser, A., Himali, J., Launer, L., Haan, M., van Duijn, C. M., Ikram, A. M., Mosley, T., & Beeri, M. Diabetes and Dementia: Identifying the optimal glycemic control patterns and treatment options to reduce risk. Funded by Alzheimer's Drug Discovery Foundation.

Dr. Shira Zelber-Sagi

Publications:

- Dagan Sherf, S., **Zelber-Sagi, S.**, Webb, M., Keidar, A., Raziell, A., Sakran, N., Goitein, D., & Shibolet, O. (2016). Nutritional Status Prior to Laparoscopic Sleeve Gastrectomy Surgery. *Obes Sur*, 26(9), 2119-2126.
- Kridin, K., Bergman, R., Khamaisi, M., & **Zelber-Sagi, S.**, Weltfriend, S. (2016). Dermatitis Cement-Induced Chromate Occupational Allergic Contact. *Dermatitis*, 27(4), 208-214.
- Kridin, K., **Zelber-Sagi, S.**, Khamaisi, M., Cohen, A.D., Bergman, R. (2016). Remarkable differences in the epidemiology of pemphigus among two ethnic populations in the same geographic region. *J Am Acad Dermatol*, 75(5), 925-930.
- Mlynarsky, L., Schlesinger, D., Lotan R., Webb, M., Halpern, Z., Santo, E., Shibolet, O., & **Zelber-Sagi, S.** (2016). Non-alcoholic fatty liver disease is not associated with a lower health perception. *World J Gastroenterol*, 22(17), 4362-4372.
- Sherf-Dagan, S., Ben-Tovim, T., Buch, A., Webb, M., Keidar, A., Raziell, A., Sakran, N., Goitein, D., Shibolet, O., & **Zelber-Sagi, S.** (2016). Inadequate protein intake after laparoscopic sleeve gastrectomy surgery is associated with a greater fat free mass loss. *Surgery for Obesity and Related Diseases*.
<http://dx.doi.org/10.1016/j.soard.2016.05.026>
- Yair-Sabag, S., Nussinson, E., Ben-Assuli, O., Shibli, F., Shahbari, A., **Zelber-Sagi, S.** (2016). Retrospective study of the associations between hepatitis C virus infection and metabolic factors. *World J Hepatology*, 8(30), 1269-1278.
- Zaslavsky, O., Li W., Going, S., Datta, M., Snetselaar, L., **Zelber-Sagi S.** (2016). Association between body composition and hip fractures in older women with physical frailty. *Geriatr Gerontol Int*. DOI: 10.1111/ggi.12798.
- Zaslavsky, O., Rillamas-Sun, E., LaCroix, AZ., Woods, N.F., Tinker, L.F., Zisberg, A., Shadmi, E., Cochrane, B., Edward, B.J., Kritchevsky, S., Stefanick, M.L., Vitolins, M.Z., Wactawski-Wende, J., & **Zelber-Sagi, S.** (2016). Association between anthropometric measures and long-term survival in frail older women: Observations from the women's health initiative study. *J Am Geriatr Soc*, 64(2), 277-284.
- Zaslavsky, O., **Zelber-Sagi, S.**, Shelly, L., Pharm, G., LaCroix, A.Z., Brunner, R.L., Wallace, R.B., O'Sullivan, M.J., Cochrane, B., Woods, N.F. (2016). A Comparison of Frailty Phenotypes for Prediction of Mortality, Incident Falls, and Hip Fractures in Older Women. *J Am Geriatr Soc*, 64(9), 1858-1862.

Dr. Shira Zelber-Sagi (continue)

Publicatios (conntinue):

Zaslavsky, O., Woods, N.F., LaCroix A.Z., Cauley, J.A., Johnson, K.C., Cochrane, B.B., & **Zelber Sagi, S.** (2016). Identification of Risk Factors for Mortality and Low-Quality-of-Life Survival in Frail Older Women Participating in Women's Health Initiative Observational Study. *J Am Geriatr Soc*, 64, 831–837.

Zelber-Sagi, S., Azar, S., Nemirovski, A., Webb, M., Halpern, Z., Shibolet, O., & Tam, J. (2016). Serum levels of endocannabinoids are independently associated with non-alcoholic fatty liver disease. *Obesity*, 25(1), 94-101.

Zelber-Sagi, S., Ben-Assuli, O., Rabinowich, L., Shalev, V., Shibolet, O., & Gabriel, C. (2016). Response letter: The Relationship between Serum Uric Acid Levels and NAFLD. *Liver international*. 36(5), 769-770.

Zelber-Sagi, S., Godos, J., & Salomone, F. (2016) Lifestyle changes for the treatment of nonalcoholic fatty liver disease: a review of observational studies and intervention trials. *Therap Adv Gastroenterology*, 9(3), 392-407.

Recent Grants:

Zelber-Sagi S., & Ivancovsky, D. The association between the type of meat and cooking method, and non-alcoholic fatty liver disease (NAFLD) and insulin. Funded by Projects and Fellowships Fund on Food and Nutrition with Implications on Public Health. Chief Scientist Office, Ministry of Health.
