Conclusion: This study indicated that dysfunctional weight growth makes up for more than half of health risk factors. The most of weight growth problems were seen at age of seventh month (94.2%) that may be related to beginning of beikost. Therefore it can be resulted that integrated well child care program well identified health risk factors in children under eight years old.

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RELATIONSHIP BETWEEN MATERNAL HEALTH BEHAVIOR AND PHYSICAL GROWTH PATTERN OF CHILDREN UNDER ONE YEAR REFERRED TO HEALTH DEPARTMENT OF RASHT

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Background and aims: Physical growth in infants is the most important health indicator. Many factors influence infants' physical growth. Because of complete dependence of infants to their mothers and role of mother care and health behavior is important for health promotion. This study aims to determine relationship between maternal health behaviors with physical growth pattern in children under one year, was done.

Methods: This research is correlation a descriptive study. Data collection tool was a questionnaire including two sections: the first part included demographic characters of mother and child, and second part included three sections for measurement of health behavior about nutrition, sleep and preventing disease in child under one year. Information related health behavior was completed with reading questionnaire and measurement of physical growth was record from file. 362 mother and their children under one year were selected randomly.

Results: Finding showed that most of children (57/5%) had unfavorable physical growth. Also the results about health preventing indicated most of (57/7%) samples had suitable health behavior and about sleep most of (88/7%) them have unsuitable health behaviors. Results showed that there was a significant correlation between mother's health behaviors in all three domains and child physical growth according to mother and child's demographic characteristics ($p < 0/001$).

Conclusions: Results showed that most of the mothers of children had suitable health behavior about children's nutrition (69/2%) sleep (19/3%), and prevention of disease (86/5%). Children had favorable physical growth and there was a significant correlation between maternal health behaviors and child physical growth pattern.

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CHILDREN'S BLOOD PRESSURE AND FOOD INTAKE

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Blood pressure (BP) in childhood often correlates with BP in adulthood. The knowledge in children's dietary influence on BP is limited.

Aims:

1. - To analyse BP and different food groups consumption relationship.
2. - To determine food intake differences between children with normal or higher BP values ($\geq 85^{\text{th}}$ percentile).

Methods: We enrolled 428 children, provided parent's consent. We measured BP: systolic (syst) and diastolic (diast), pulse pressure (PP), mean pressure (MP). A 7-days questionnaire provided diet information. Z-score BP values classified participants into two groups: High-BP (HBP) ≥ 1.03 (n: syst=46, diast=100), Normal-BP (NBP) < 1.03 (n: syst=382, diast=328).

Results:

- Age: 7.9 ± 2.4 years.
- Correlation's analysis (significant results, Pearson C):