



DIPARTIMENTO DI SCIENZE MEDICHE E CHIRURGICHE

Modulo richiesta assegno

TUTOR	Paolo Boffetta	
Fascia VRA	(compilazione a cura della Giunta)	Punti
<u>PRODUZIONE SCIENTIFICA ASSEGNISTI NELL'ULTIMO QUADRIENNIO</u>		Punti
Nome e n° mesi assegnista	Fatemeh Toorang – 9 months	
Max. 4 lavori in extenso su riviste indicizzate PubMed	Toorang F, Seyyedsalehi MS, Sasanfar B, Rashidian H, Hadji M, Mohebbi E, Safari R, Najefi F, Naghibzadeh-Tahami A, Boffetta P, Zendehtdel K. Dietary total antioxidant capacity and head and neck cancer: a large case-control study in Iran. Front Nutr. 2023 Sep 27;10:1226446. doi: 10.3389/fnut.2023.1226446. PMID: 37841408; PMCID: PMC10569465.	
	Nemati S, Mohebbi E, Toorang F, Hadji M, Hosseini B, Saeedi E, Abdi S, Nahvijou A, Kamangar F, Roshandel G, Ghanbari Motlagh A, Pourshams A, Poustchi H, Haghdoost AA, Najafi F, Sheikh M, Malekzadeh R, Zendehtdel K. Population attributable proportion and number of cancer cases attributed to potentially modifiable risk factors in Iran in 2020. Int J Cancer. 2023 Nov 15;153(10):1758-1765. doi: 10.1002/ijc.34659. Epub 2023 Aug 7. PMID: 37548110.	
	Sasanfar B, Toorang F, Salehi-Abarghouei A. Effects of n-3 polyunsaturated fatty acid supplementation on appetite: a systematic review and meta-analysis of controlled clinical trials. Syst Rev. 2024 Jan 27;13(1):44. doi:10.1186/s13643-023-02430-y. PMID: 38281014; PMCID: PMC10821539.	
Nome e n° mesi assegnista	Mahsa Abedini – 12 months	
Max. 4 lavori in extenso su riviste indicizzate PubMed	piteri G, D'Agostini M, Abedini M, Ditano G, Collatuzzo G, Boffetta P, Vimercati L, Sansone E, De Palma G, Modenese A, Gobba F, Liviero F, Moretto A, dell'Omo M, Fiordi T, Larese Filon F, Mauro M, Violán C, Mates D, Oravec Bérešová J, Monaco MGL, Carta A, Verlatto G, Porru S. Protective role of SARS-CoV-2 anti-S IgG against breakthrough infections among European healthcare workers during pre and post-Omicron surge-ORCHESTRA project. Infection. 2024 Feb 7. doi:	



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	<p>10.1007/s15010-024-02189-x. Epub ahead of print. PMID: 38326526</p>
	<p>Leomanni L, Collatuzzo G, Sansone E, Sala E, De Palma G, Porru S, Spiteri G, Monaco MGL, Basso D, Pavanello S, Scapellato ML, Larese Filon F, Cegolon L, Mauro M, Lodi V, Lazzarotto T, Noreña I, Reinkemeyer C, Giang LTT, Fabiánová E, Strhársky J, Dell'Omo M, Murgia N, Carrasco-Ribelles LA, Violán C, Mates D, Rascu A, Vimercati L, De Maria L, Asafo SS, Ditano G, Abedini M, Boffetta P. Determinants of Anti-S Immune Response at 12 Months after SARS-CoV-2 Vaccination in a Multicentric European Cohort of Healthcare Workers-ORCHESTRA Project. <i>Vaccines (Basel)</i>. 2023 Sep 26;11(10):1527. doi: 10.3390/vaccines11101527. PMID: 37896931; PMCID: PMC10610704.</p>
	<p>Violán C, Carrasco-Ribelles LA, Collatuzzo G, Ditano G, Abedini M, Janke C, Reinkemeyer C, Giang LTT, Liviero F, Scapellato ML, Mauro M, Rui F, Porru S, Spiteri G, Monaco MGL, Carta A, Otelea M, Rascu A, Fabiánová E, Klöslová Z, Boffetta P, Torán-Monserrat P. Multimorbidity and Serological Response to SARS-CoV-2 Nine Months after 1st Vaccine Dose: European Cohort of Healthcare Workers-Orchestra Project. <i>Vaccines (Basel)</i>. 2023 Aug 8;11(8):1340. doi: 10.3390/vaccines11081340. PMID: 37631908; PMCID: PMC10459685.</p>
	<p>Porru S, Monaco MGL, Spiteri G, Carta A, Caliskan G, Violán C, Torán-Monserrat P, Vimercati L, Tafuri S, Boffetta P, Violante FS, Sala E, Sansone E, Gobba F, Casolari L, Wieser A, Janke C, Tardon A, Rodriguez-Suarez MM, Liviero F, Scapellato ML, dell'Omo M, Murgia N, Mates D, Calota VC, Strhársky J, Mrázová M, Pira E, Godono A, Magnano GC, Negro C, Verlatto G; Orchestra WP5 Working Group. Incidence and Determinants of Symptomatic and Asymptomatic SARS-CoV-2 Breakthrough Infections After Booster Dose in a Large European Multicentric Cohort of Health</p>



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	Workers-ORCHESTRA Project. J Epidemiol Glob Health. 2023 Sep;13(3):577-588. doi: 10.1007/s44197-023-00139-8. Epub 2023 Jul 22. PMID: 37480426; PMCID: PMC10468456.
Nome e n° mesi assegnista	
Max. 4 lavori in extenso su riviste indicizzate PubMed	
Nome e n° mesi assegnista	
Max. 4 lavori in extenso su riviste indicizzate PubMed	

Commissione proposta 3 commissari + 1 supplente	Paolo Boffetta
	Carlotta Zunarelli
	Cristiana Caliceti
	Valentina Biagioli

TITOLO DEL PROGETTO			
Waterpipe use and cancer risk			
ASSEGNO FINANZIATO DA PROGETTO COMPETITIVO <i>(barrare la casella corrispondente)</i>	<input checked="" type="checkbox"/> SI	<input type="checkbox"/> NO	<i>Punti</i>



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SE IL FINANZIAMENTO È COMPETITIVO L'ENTE FINANZIATORE	AIRC - Associazione Italiana Ricerca sul Cancro	
PROGETTO/ATTIVITÀ A SCOPO COMMERCIALE <i>(es. sperimentazione profit)</i>	<input type="checkbox"/> SI	<input checked="" type="checkbox"/> NO
CARATTERISTICHE DEL PROGETTO <i>(biomedico/osservazionale/clinico- interventistico/multidisciplinare)</i>	Osservazionale	
STATO DI APPROVAZIONE DEL PROGETTO DA PARTE DEL COMITATO ETICO <i>(se necessario per il tipo di studio barrare o evidenziare la casella corrispondente)</i>	<input checked="" type="checkbox"/> Ottenuto	<input type="checkbox"/> Da ottenere
DESCRIZIONE DEL PROGETTO <i>(max 800 parole)</i>	Punti	
<p>Hookah, also called waterpipe, is a smoking tobacco product that has been traditionally used in many cultures and is becoming increasingly common in Italy and other high-income constituencies. Despite its importance as potential cause of cancer and other chronic diseases, limited data are available in the literature on the detailed aspects of the health effects of hookah smoking, and on biomarkers that underlie such effects, and could be used for personalized risk assessment. In the proposed research, we will conduct an analysis of unprecedented depth of the relationship between hookah smoking and cancer risk. The results of the proposed analysis will provide very strong evidence in favor or against the hypothesis of a higher risk of cancer, and a higher level of tobacco-related in hookah smokers compared to non-tobacco users and cigarette smokers. Since the toxicity of hookah smoking might exceed that of cigarettes, strong data on carcinogenicity of hookah smoking in humans are needed to support evidence-based regulatory decisions, which would be relevant to tobacco control in general.</p> <p>Historically, hookah smoking has been prevalent in North Africa and West and Central Asia, and a small number of studies have been published on health outcomes of hookah smoking from these regions. Hookah smoke contains many toxic compounds found in cigarette smoke, and hookah smokers appear to be exposed to the same agents as cigarette smokers, probably at higher levels: each puff from hookah has been reported to deliver 12-times as much smoke as a single cigarette puff. Some data suggest that hookah smoking may increase the risk of spreading infectious diseases, such as tuberculosis, hepatitis and herpes. Associations between hookah smoking and cancers of the head and neck, esophagus, lung and bladder cancer have been reported in a few studies: the results are stronger for esophageal cancer. In general, however, most of previous studies suffer from limitations including (i) suboptimal choice of controls (e.g., relatives), (ii) small number of exposed cases and controls, (iii) inclusion of cigarette smokers with hookah smokers, (iv) lack</p>		



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of results on duration or amount of hookah smoking, so further research is needed to confirm these associations.

Although several studies have been published on the association between cigarette smoking and cancer and other non-communicable diseases, data on the association between waterpipe smoking and cancer is limited. Most of the published studies are outdated, used small sample sizes, or suffer from methodological limitations and did not adjust for confounding factors. Urgent priority must be given to designing and implementing research in the Eastern Mediterranean region, where a large number of men and women of all age groups have been extensively exposed to waterpipe smoking.

The goal is to establish an international, multidisciplinary team that will utilize the best research tools to undertake large collaborative research projects, enhance our understanding, and promote public health measures to control waterpipe smoking. To facilitate this effort, we plan to establish the INTERHooC consortium, where researchers and key stakeholders in waterpipe and cancer research can collaborate to discuss research priorities, establish a network, and develop a comprehensive research agenda.

DESCRIZIONE DELLE ATTIVITÀ DELL'ASSEGNISTA

(per i **nuovi** assegni: **max 400 parole**; competenze richieste, scansione temporale della formazione, scansione temporale dell'attività, obiettivi primari e secondari)

(per i **rinnovi**: **max 600 parole** – da integrare con la relazione dell'assegnista; formazione raggiunta, attività effettuata, obiettivi raggiunti/competenze acquisite, formazione ancora da acquisire (se pertinente), scansione temporale dell'attività durante il rinnovo)

Punti

The fellow will work on the establishment of INTERHooC, an international consortium of research on waterpipe (hookah) smoking and cancer. Specific tasks will include:

1. To review existing studies and discuss methodological issues in research on the health effects of waterpipe smoking
2. To develop study protocols and standard tools for launching harmonized and high-quality research on the association between waterpipe smoking and cancer, as well as other outcomes such as cardiovascular and chronic pulmonary diseases.
3. To promote communication and collaboration among investigators leading epidemiological studies of waterpipe smoking.
4. To contribute to define research priorities and develop a framework for future studies and collaborations, and explore opportunities to apply for national, regional, and international research grants



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SE RINNOVO, SI RICORDA DI ALLEGARE ANCHE LA RELAZIONE DELL'ASSEGNISTA CON LA SUA PRODUZIONE SCIENTIFICA.

Scheda attività assistenziale (se prevista)

ATTIVITÀ ASSISTENZIALI DELL'ASSEGNISTA/ N. ORE SETTIMANA
Nessuna
AZIENDA SANITARIA PRESSO CUI SI SVOLGERÀ L'ATTIVITÀ

Si ricorda che, come previsto dagli Accordi sull'impiego nell'attività assistenziale dei Titolari di assegni di ricerca, sottoscritti tra l'Università di Bologna e le Aziende Ospedaliere di riferimento, una volta stipulato il contratto con il vincitore della selezione, il tutor deve consegnare alla Direzione Medica Ospedaliera la relativa modulistica, nella quale andranno riportate le attività qui segnalate.